

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30047

FILED
Apr 07, 2009
Secretary of State

Entity Name: OUR FATHER'S TABLE, INC.

Current Principal Place of Business:

MT ZION AME CHURCH
4221 28TH AVE
VERO BEACH, FL 32967 US

New Principal Place of Business:

Current Mailing Address:

4221 28TH AVENUE
P.O. BOX 6114
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 65-0203644 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUNDY, RALPH
4546 38TH AVE
VERO BEACH, FL 32967 US

Name and Address of New Registered Agent:

MAY JOHN W
1615 18TH AVE SW
VERO BEACH, FL 32962 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN W. MAY 3RD

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: CHEW, CLAUDE C
Address: 236 14TH AVENUE
City-St-Zip: VERO BEACH, FL 32967 US

Title: DST () Delete
Name: PERSON, SYLVIA
Address: 5855 59TH COURT
City-St-Zip: VERO BEACH, FL 32967 US

Title: D () Delete
Name: PICKNEY, RACHEL
Address: 2820 41TH STREET
City-St-Zip: VERO BEACH, FL 32967 US

Title: D () Delete
Name: BUTLER, WILMORE
Address: 4221 28TH AVENUE
City-St-Zip: VERO BEACH, FL 32967 US

Title: S () Delete
Name: FORBES, LYDIA
Address: 2047 INDIAN SUMMER LANE
City-St-Zip: VERO BEACH, FL 32963 US

Title: D () Delete
Name: CAMPBELL, REV. MILLARD
Address: 745 BEACON ST. NW
City-St-Zip: PALM BAY, FL 32907 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MAY 3RD, JOHN W
Address: 1615 18TH AVE SW
City-St-Zip: VERO BEACH, FL 32962 US

Title: TREA (X) Change () Addition
Name: PERSON, SYLVIA
Address: 5855 59TH COURT
City-St-Zip: VERO BEACH, FL 32967 US

Title: VP (X) Change () Addition
Name: GREENSTEIN, BOB
Address: 426 32ND AVE SW
City-St-Zip: VERO BEACH, FL 32968 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN W. MAY 111

PRES

04/07/2009

Electronic Signature of Signing Officer or Director

Date