

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50978

FILED
Mar 05, 2009
Secretary of State

Entity Name: THE LORD'S TABLE OF INDIAN RIVER COUNTY INC.

Current Principal Place of Business:

FELLSMERE COMM. E. PROGRAM
10074-101 ST
FELLSMERE, FL 32948

New Principal Place of Business:

10074 101ST ST.
FELLSMERE, FL 32948

Current Mailing Address:

PO BOX 780686
SEBASTIAN, FL 32978

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BOWERS, CAMILLE E
1611 CORAL REEF ST
SEBASTIAN, FL 32958 US

Name and Address of New Registered Agent:

SEIFERT, KENNETH J
75 JOY HAVEN DR.
SEBASTIAN, FL 32958 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: KENNETH J. SEIFERT

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEMARLINO, CHARLES
Address: 1969 E. LAKEVIEW DR.
City-St-Zip: SEBASTIAN, FL 32958

Title: DV () Delete
Name: BUCKMAN, ELLAC
Address: 6245 81ST ST
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: BUCKMAN, ELLA C
Address: 6245 81ST ST
City-St-Zip: VERO BEACH, FL 32967

Title: SD () Delete
Name: DE MARTINO, ANNE
Address: 1969 EAST LAKEVIEW DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: T () Delete
Name: SEIFERT, KEN
Address: 15 JOY HAVEN DR.
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: T (X) Change () Addition
Name: SEIFERT, KEN
Address: 75 JOY HAVEN DR.
City-St-Zip: SEBASTIAN, FL 32958

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: KENNETH J. SEIFERT

T

03/05/2009

Electronic Signature of Signing Officer or Director

Date