

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90009 018 ****70.00

DOCUMENT # N95000004673					
1. Entity Name THE CHILDREN'S TABLE, INC.					
Principal Place of Business 10451 NE 125 AVENUE BRONSON, FL 32621			Mailing Address PO BOX 186 ARCHER, FL 32618		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired		☒ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent BROWN, WILLIAM A., SR. 10451 NE 125 AVENUE BRONSON, FL 32691					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D BROWN, WILLIAM A., SR. 10451 NE 125 AVENUE BRONSON, FL 32621	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MCCREA, ARLEY 1517 BESSENT RD STARKE, FL 32091	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D BROWN, VERNA 10451 NE 125 AVENUE BRONSON, FL 32621	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TWOMBLY, CHERYL 10451 NE 125 AVE BRONSON, FL 32621	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NELDERMEYER, JACK REV. 20650 SW 102 ST ROAD DUNNELLON, FL 34431	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, ELIZABETH 10451 NE 125 AVE BRONSON, FL 32621	☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>William A. Brown Sr</u> 07-06-04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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