


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90081 022 ***150.00

DOCUMENT # P98000005279 1. Entity Name THE FATHER'S TABLE, INC.	
---	---

Principal Place of Business 2100 COUNTRY CLUB RD SANFORD, FL 32771	Mailing Address 2100 COUNTRY CLUB RD SANFORD, FL 32771
--	--

40046605



03092007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3497806	Applied For Not Applicable
------------------------------------	--------------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--

6. Name and Address of Current Registered Agent GRAY, N D JR % GREENSPOON, MARDER, ET AL 201 E. PINE ST., STE. 500 ORLANDO, FL 32801

**DO NOT WRITE
IN THIS SPACE**

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRAY, N D JR 201 E. PINE ST., STE. 500 ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GILARDI, PAMELA J 2100 COUNTRY CLUB RD SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHLATER, JOHN 615 COPELAND MILL ROAD WESTERVILLE, OH 43081
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FREDMAN, MARLA 2100 COUNTRY CLUB ROAD SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FRANTZ, MICHAEL J 2100 COUNTRY CLUB ROAD SANFORD, FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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:

N. Dwayne Gray, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/07
Date

407-425-6559
Daytime Phone #