

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000004055

Entity Name: TABLE 2 COMMITTEE, INC.**Current Principal Place of Business:**2834 OSPREY COVE DRIVE
NEW SMYRNA BEACH, FL 32168**Current Mailing Address:**P. O. BOX 393
NEW SMYRNA BEACH, FL 32170**FEI Number: 83-4173118****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIGLER, CHARLES
2834 OSPREY COVE DRIVE
NEW SMYRNA BEACH, FL 32168 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIR
Name	SIGLER, CHARLES
Address	2834 OSPREY COVE DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	DIR
Name	BUCKINGHAM, JEFF
Address	16 CHIP LANE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	DIR
Name	BARRINGER, MARK
Address	1000 CONRAD DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	DIR
Name	BARRINGER, LUKE
Address	823 EAST 23RD AVE
City-State-Zip:	NEW SMYRNA BEACH FL 32169

Title	DIR
Name	BOTTING, CHRIS
Address	814 E 23RD AVE
City-State-Zip:	NEW SMYRNA BEACH FL 32128

Title	DIR
Name	BLIKER, MICHAEL
Address	530 CLUBHOUSE BLVD
City-State-Zip:	NEW SMYRNA BEACH FL 32168

I hereby 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 all other like empowered.

SIGNATURE: CHARLES ANDREW SIGLER**DIRECTOR****02/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date