

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076502

FILED
Apr 05, 2009
Secretary of State

Entity Name: IRISH SONS, INC.

Current Principal Place of Business:

709 BRANTENBURG WAY
LUTZ, FL 33548

New Principal Place of Business:

Current Mailing Address:

709 BRANTENBURG WAY
LUTZ, FL 33548

New Mailing Address:

FEI Number: 26-0470490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOWLES, LARRY
709 BRANTENBURG WAY
LUTZ, FL 33548 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KNOWLES, LARRY
Address: 709 BRANTENBURG WAY
City-St-Zip: LUTZ, FL 33548

Title: VP () Delete
Name: KNOWLES, RYAN
Address: 3704 W. SEVILLA
City-St-Zip: TAMPA, FL 33629

Title: VP () Delete
Name: KNOWLES, JEFFREY
Address: 20350 CHESTNUT GROVE
City-St-Zip: TAMPA, FL 33647

Title: S () Delete
Name: GIESLER, JEANIE
Address: 709 BRANTENBURG WAY
City-St-Zip: LUTZ, FL 33548

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY KNOWLES

PRES

04/05/2009

Electronic Signature of Signing Officer or Director

_____ Date