

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000164471

**Entity Name:** GREAT IRISH PUBS FLORIDA, INC.

**Current Principal Place of Business:**

1640 EAST BUENA VISTA DRIVE  
LAKE BUENA VISTA, FL 32830

**Current Mailing Address:**

1302 ORANGE AVE  
WINTER PARK, FL 32789 US

**FEI Number: 83-0414942**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPDIRECT AGENTS, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DP  
Name COOKE, JOHN  
Address 1640 EAST BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title DVPS  
Name NOLAN, PAUL  
Address 11476 WILLOWS GARDEN DRIVE  
City-State-Zip: WINDERMERE FL 34786

Title D  
Name BRADSHAW, LAR  
Address 1640 EAST BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title D  
Name COX, MAURICE  
Address 1640 EAST BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title D  
Name FITZPATRICK, SEAN  
Address 1640 EAST BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title D  
Name OSBORNE, JAMES  
Address 1640 EAST BUENA VISTA DRIVE  
City-State-Zip: LAKE BUENA VISTA FL 32830

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

**SIGNATURE: JOHN COOKE**

**DP**

**04/16/2014**

Electronic Signature of Signing Officer/Director Detail

Date