2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724393

FILED Apr 21, 2007 Secretary of State

Entity Name: FLORIDA WEST COAST IRISH-AMERICAN CLUB INC

Current Principal Place of Business:			New Principal Place of Business:	
	A CIEGA PT BLVD S. RSBURG, FL 33708			
Current N	Mailing Address:		New Mailing Address:	
	A CIEGA PT BLVD S. RSBURG, FL 33708			
FEI Number	: 59-2924184 FEI	Number Applied For ()	FEI Number Not Applicable () Cert	ificate of Status Desired()
Name and	d Address of Curre	nt Registered Agent:	Name and Address of New F	Registered Agent:
158 BOCÁ	, YVONNE A CIEGA PT BLVD S RSBURG, FL 33708			
		ts this statement for the p	urpose of changing its registered office	or registered agent, or both
iii tile Otat	e of Florida.			or registered agent, or both,
				or registered agent, or both,
	RE:	nature of Registered Ag		Date
SIGNATUI	RE:			Date
SIGNATUI OFFICER: Title: Name: Address:	RE: Electronic Sig	5: e VAY #27	nt ADDITIONS/CHANGES TO C	Date
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electronic Sig S AND DIRECTORS P () Delete COWEN, OLIVE 2429 ECUADORIAN W	3: •• VAY #27 3763	ADDITIONS/CHANGES TO C Title: () Chan Name: Address: City-St-Zip:	Date DEFICERS AND DIRECTOR ge () Addition ge () Addition RCLE DR.
SIGNATUI	Electronic Signature Electronic Electronic Signature Electronic Electronic Signature Electron	5: WAY #27 3763 1516	ADDITIONS/CHANGES TO C Title: () Chan Name: Address: City-St-Zip: Title: VP (X) Chan Name: WYNNE, PIERCE Address: 2531 ROYAL PINE CI City-St-Zip: CLEARWATER, FL 3	Date DEFICERS AND DIRECTOR ge () Addition ge () Addition RCLE DR.

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YVONNE S. HUGHES T 04/21/2007