

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736658

FILED
Apr 22, 2008
Secretary of State

Entity Name: FLORIDA IRISH AMERICAN CLUB OF ST. PETERSBURG, INC.

Current Principal Place of Business:

5773 62ND ST NO
PINELLAS PARK, FL 33713 US

New Principal Place of Business:

Current Mailing Address:

5900 SHORE BLVD S
108
GULFPORT, FL 33707 US

New Mailing Address:

FEI Number: 59-1700127 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RAFERY, KATHIE
5900 SHORE BLVD S
108
GULFPORT, FL 33707 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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: KWASNIK, CATHERINE
Address: 6020 SHORE BLVD SO 203
City-St-Zip: GULFPORT, FL 33707

Title: P () Delete
Name: WERTON, TERRY
Address: 7100 ULMERTON RD
City-St-Zip: LARGO, FL

Title: S () Delete
Name: MC NAMARA, JANET
Address: 4819 29TH AVE N
City-St-Zip: ST PETERSBURG, FL 33713

Title: T () Delete
Name: RAFERTY, KATHIE
Address: 5900 SHORE BLVD SO #108
City-St-Zip: GULFPORT, FL 33707

Title: D () Delete
Name: BRENNAN, PEGGY
Address: 2708 53RD ST SO
City-St-Zip: GULFPORT, FL 33707

Title: D () Delete
Name: BRENNAN, JERRY
Address: 2708 53RD ST SO
City-St-Zip: GULFPORT, FL 33709

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:

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

SIGNATURE: KATHIE RAFERTY

T

04/22/2008

Electronic Signature of Signing Officer or Director

Date