

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90053 030 ****61.25

DOCUMENT # 754626

1. Entity Name

SONS AND DAUGHTERS OF ERIN, INC.



Principal Place of Business

7725-2 FOREST TRAIL
PORT RICHEY FL 34668
US

Mailing Address

7725-2 FOREST TRAIL
PORT RICHEY FL 34668
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number
NO-T APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TREANOR, FRANCIS J
77252 FOREST TRAIL
PORT RICHEY FL 34668

7. Name and Address of New Registered Agent

Name Betty O'Brien
Street Address (P.O. Box Number is Not Acceptable)
4007 AULNADA DEL MAR
City NEW PORT RICHEY FL Zip Code 34655

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Elizabeth Matthews President

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

2/1/06
DATE

FILE NOW FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

☒ **Make Check Payable to**
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME MATTHEWS, ELIZABETH
STREET ADDRESS 10620 SALAMANCA DR.
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE S ☐ Delete
NAME O'NEILL, JOHN
STREET ADDRESS 7741 SAGEBRUSH DR.
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE S ☒ Delete
NAME STICH, VICTOR
STREET ADDRESS 7505 SAN MIGUEL
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE D ☐ Delete
NAME FORCE, WILLIAM
STREET ADDRESS 5413 PALM DR.
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE T ☒ Delete
NAME TREANOR, FRANCIS J
STREET ADDRESS 7725-2 FOREST TRAIL
CITY-ST-ZIP PORT RICHEY FL 34668

TITLE Wojewski ☐ Delete
NAME WASESKI, PATRICIA
STREET ADDRESS 7604 COVENTRY DR.
CITY-ST-ZIP PORT RICHEY FL 34668

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Change ☐ Addition
NAME
STREET ADDRESS Mary Matthews Jones
CITY-ST-ZIP

TITLE T ☐ Change ☐ Addition
NAME
STREET ADDRESS Betty O'Brien
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elizabeth Matthews President

27-862-1214