

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754626

FILED
Mar 13, 2009
Secretary of State

Entity Name: SONS AND DAUGHTERS OF ERIN, INC.

Current Principal Place of Business:

10260 CASEY DR
NEW PORT RICHEY, FL 34654 US

New Principal Place of Business:

Current Mailing Address:

10260 CASEY DR
NEW PORT RICHEY, FL 34654 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWERS-MCMAHON, ANN
12434 FERNDAL CT
HUDSON, FL 34669 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: PD () Delete
Name: KIRCHER, KATHLEEN
Address: 10260 CASEY DR
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S () Delete
Name: MURRAY, KAY
Address: 13209 MOLITOR CT.
City-St-Zip: HUDSON, FL 34669

Title: VP () Delete
Name: HAGAN, GLORIA
Address: 11451 STRANSBERRY DR
City-St-Zip: PORT RICHEY, FL 34668

Title: T () Delete
Name: POWERS-MCMAHON, ANN
Address: 12434 FERNDAL CT
City-St-Zip: HUDSON, FL 34669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAUNDERS, JOHN
Address: 8210 MILL CREEK LANE
City-St-Zip: BAYONET POINT, FL 34667 PA

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: ANN K. POWERS-MCMAHON

T

03/13/2009

Electronic Signature of Signing Officer or Director

Date