

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000056412

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** IRISHTOWN, LLC

**Current Principal Place of Business:**

89 SOUTH STREET SEAPORT, PIER 17, 3RD FL  
NEW YORK, NY 10038

**New Principal Place of Business:**

**Current Mailing Address:**

89 SOUTH STREET SEAPORT, PIER 17, 3RD FL  
NEW YORK, NY 10038

**New Mailing Address:**

**FEI Number:** 26-2774396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** DELANEY, JAMES P  
**Address:** 49 WEST 72ND STREET, APT. 4-B  
**City-St-Zip:** NEW YORK, NY 10023

**Title:** MGRM  
**Name:** DELANEY, DERMOT  
**Address:** 333 EAST 43RD STREET, APT. 701  
**City-St-Zip:** NEW YORK, NY 10017

**Title:** MGRM  
**Name:** DELANEY, ANNE MARIE  
**Address:** 300 RECTOR PLACE, APT. 4-G  
**City-St-Zip:** NEW YORK, NY 10280

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** J.P DELANEY

MGR

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date