

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003102

FILED
Feb 09, 2005
Secretary of State

Entity Name: CAPE CORALIRISH AMERICAN CLUB, INC

Current Principal Place of Business:

1110 NE 2ND PL
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

1110 NE 2ND PL
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 54-2105507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERRY, MICHAEL
1110 NE 2ND PL
CAPE CORAL, FL 33909 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: T () Delete
Name: TERRY, MICHAEL
Address: 928 NW 3RD AVE.
City-St-Zip: CAPE CORAL, FL 33993

Title: P () Delete
Name: POHLMAN, TODD
Address: 603 SW 6TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: S () Delete
Name: HUNT, KEN
Address: 1002 SE 16TH ST
City-St-Zip: CAPE CORAL, FL 33990

Title: VP () Delete
Name: BURKE, MICHAEL
Address: 929 NW 3RD AVE
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MCKAY, CINDY
Address: 213 SW 44TH ST.
City-St-Zip: CAPE CORAL, FL 33914

Title: P (X) Change () Addition
Name: HAYS, HOWARD
Address: PO BOX 4295
City-St-Zip: N. FT. MYERS, FL 33912

Title: S (X) Change () Addition
Name: O'NEIL, MARY
Address: 3536 SE 3RD AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CINDY MCKAY

T

02/09/2005

Electronic Signature of Signing Officer or Director

Date