2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008484

FILED Mar 27, 2009 Secretary of State

Entity Name: ST. PATRICK'S DAY COMMITTEE, INC. **Current Principal Place of Business: New Principal Place of Business:** P. O. BOX 836225 MIAMI, FL 332836225 **Current Mailing Address: New Mailing Address:** PO BOX 836225 MIAMI, FL 332836225 FEI Number: 59-1862399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KELLEY, CHRISTOPHER P 11098 BÍSCAYNE BOULEVARD SUITE 205 MIAMI, FL 33161 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCKAY, JANICE PRES Name: Name: Address: 9908 S.W. 218TH TERRACE Address: City-St-Zip: MIAMI, FL 33190 City-St-Zip: Title: VD () Delete Title: () Change () Addition DAVIS, CHARLES VP Name: Name: Address: 21495 S.W. 183 AVENUE Address: City-St-Zip: MIAMI, FL 33187 City-St-Zip: Title: () Delete Title: () Change () Addition DOHERTY, JOHN P TREAS Name: Name: 9810 S.W. 115 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WOODBRIDGE, YOLANDA V SEC Name: KERR, MARY ANN SEC 8305 S.W. 169TH TERRACE Address: 2655 LEJEUNE ROAD, #321 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: PALMETTO BAY, FL 33157

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: JOHN P. DOHERTY TD 03/27/2009