

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

09-12-2005 90003 013 ***150.00

P03000084562

FILED

05 OCT 21 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT (10/04)

05

DOCUMENT # P03000084562 1. Entity Name IRISH PROPERTIES, INC.						
Principal Place of Business 21143 LITTLE LAKE THOMAS RD LAND O LAKE FL 34638			Mailing Address 21143 LITTLE LAKE THOMAS RD LAND O LAKE FL 34638			
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country			City & State Zip Country			
4. FEI Number AP-PLIED FOR				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent COUNIHAN, PAUL 6408 BROOK HOLLOW CT. TAMPA FL 33634				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. <input type="checkbox"/> Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P, T COUNIHAN, PAUL 21143 LITTLE LAKE THOMAS RD LAND O LAKE FL 34638		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP			<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, 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: _____				Date: <u>8/30/05</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #: <u>(813) 846-3286</u>		



10/24/2005 MON 11:41 FAX 813 901 3142

WATERS-HANLEY

001
Waters

10/21/05

Irish Properties, Inc.
21143 Little Lake Thomas Rd.
Tampa, FL 34638

File # P03000084568

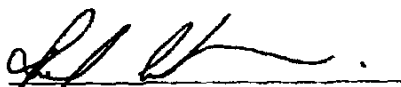
Fax # (850) 245-6017

Attn: Barbara

This letter is to inform you that this corporation did not receive prior notices for filling 2005 Annual Report. Please waver additional fees and reinstate above mentioned corporation.

Thanking you in advance for all your assistance in the above mentioned matter.

Sincerely Yours,


Paul Counihan