

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000125331

FILED
Feb 09, 2009
Secretary of State

Entity Name: DICEY REILLY'S IRISH PUB, INC.

Current Principal Place of Business:

1107 EASTERN AVE.
ST. CLOUD, FL 34769

New Principal Place of Business:

918 NEW YORK AVE.
ST. CLOUD, FL 34769

Current Mailing Address:

1107 EASTERN AVE.
ST. CLOUD, FL 34769

New Mailing Address:

918 NEW YORK AVE.
ST. CLOUD, FL 34769

FEI Number: 20-5893425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTER H. MESSICK, P.A.
1900 CORPORATE BLVD.
SUITE 305 WEST
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REILLY, BRIDGET
Address: 1107 EASTERN AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: DPS () Delete
Name: WALSH, MARGARET
Address: 1107 EASTERN AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: DVT () Delete
Name: WALSH, JAMES
Address: 1107 EASTERN AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: D () Delete
Name: REILLY, MICHAEL
Address: 1107 EASTERN AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WALSH, JAMES
Address: 918 NEW YORK AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: DS (X) Change () Addition
Name: WALSH, MARGARET
Address: 918 NEW YORK AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: DVP (X) Change () Addition
Name: REILLY, MICHAEL
Address: 918 NEW YORK AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: DT (X) Change () Addition
Name: NIETO, ELIZABETH
Address: 918 NEW YORK AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: D () Change (X) Addition
Name: REILLY, PHILOMENA
Address: 918 NEW YORK AVE.
City-St-Zip: ST. CLOUD, FL 34769

Title: D () Change (X) Addition
Name: NIETO, EFRAIN
Address: 918 NEW YORK AVE.
City-St-Zip: ST. CLOUD, FL 34769

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGARET A. WALSH

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02/09/2009

Electronic Signature of Signing Officer or Director

Date