2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023296

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

CAPE CORAL, FL

860 B SE 46 LN

CAPE CORAL, FL

CICIRETTI, HELEN J.

() Delete

Entity Name: SHAMROCK REALTY & DEVELOPMENT INC.

FILED Mar 13, 2009 Secretary of State

Current P	rincipal Place	of Business:	New	New Principal Place of Business:			
1306 SE 4	6 LN						
2 CAPE CO	RAL, FL 33904	l US					
Current M	lailing Addres	s:	New	New Mailing Address:			
1306 SE 4	6 LN						
2 CAPE CO	RAL, FL 33904	l US					
FEI Number	: 65-0414878	FEI Number Applied For ()	FEI Number No	t Applicable ()	Certificate of Status Desir	ed ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
2932 SW 2	I, HELEN J 2ND LANE RAL, FL 33991	US					
	named entity s e of Florida.	submits this statement for	the purpose of chan	ging its registere	ed office or registered agent	, or both,	
SIGNATUI	RE:						
	Electron	ic Signature of Registered	Agent		Date		
Election Ca	mpaign Financing	Trust Fund Contribution ().					
OFFICER	S AND DIREC	TORS:	ADDI	TIONS/CHANG	ES TO OFFICERS AND DI	RECTORS	
Title: Name: Address: City-St-Zip:	HELEN CICIRE 860 B SE 46 LN	l [*]	Title: Name: Addres City-St	s: 1306 SE 46	(X) Change () Addition SIRETTI, SILN SUITE 2 AL, FL 33904		
Title: Name: Address: City-St-Zip:	VP () CICIRETTI, HEL 860 B SE 46 LN CAPE CORAL,	I	Title: Name: Addres City-St				
Title: Name:	S () CICIRETTI, HEL		Title: Name:	S CICIRETTI, s: 1306 SE 4			

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

CAPE CORAL, FL 33904

CAPE CORAL, FL 33904

CICIRETTI, HELEN J.

1306 SE 46 LN

(X) Change () Addition

SIGNATURE: HELEN CICIRETTI P 03/13/2009