

2006 FOR PROFIT CORPORATION ANNUAL REPORT

4/1

FILED
May 08, 2006 8:00 am
Secretary of State

04-20-2006 90197 012 ***150.00

DOCUMENT # S72373

1. Entity Name
BLARNEY, INC.



Principal Place of Business
**3221 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118**

Mailing Address
**3221 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04172006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WELSH, BARBARA P
3221 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118**

Name **PATRICK J. WELSH**

Street Address (P.O. Box Number is Not Acceptable)

3221 So Atlantic Ave

City **Daytona Beach FL** Zip Code **32118**

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

Patrick J. Welsh

Signature, typed or printed name of registered agent, and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/17/06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSVP
PATRICK J. WELSH
3221 S. ATLANTIC AVE.
DAYTONA BCH., FL 32118**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Patrick J. Welsh

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/3/06

Daytime Phone #

Patrick J. Welsh Pres.