

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000082527

**Entity Name:** CONWAY TRUST, LLC

**Current Principal Place of Business:**

1030 ROYAL PASS ROAD  
TAMPA, FL 33602

**Current Mailing Address:**

1030 ROYAL PASS ROAD  
TAMPA, FL 33602 US

**FEI Number:** 20-1894756

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LASMAN, JEFFREY MESQ.  
C/O LASMAN LAW FIRM, P.A.  
6152 DELANCEY STATION STREET, SUITE 205  
RIVERVIEW, FL 33569 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

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	CONWAY, ADAM K	Name	CONWAY, BETH M
Address	1030 ROYAL PASS ROAD	Address	1030 ROYAL PASS ROAD
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ADAM CONWAY

**MGRM**

**04/04/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date