

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M29211

FILED  
Jan 07, 2006  
Secretary of State

Entity Name: PAT CONWAY & ASSOCIATES, INC.

## Current Principal Place of Business:

1177 GEROGE BUSH BLVD  
#304  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

2 ENGEL DRIVE  
OCEAN RIDGE, FL 33435

## New Mailing Address:

FEI Number: 59-2673516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CONWAY, PATRICK M.  
2 ENGEL DRIVE  
OCEAN RIDGE, FL 33435 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: PC ( ) Delete  
Name: CONWAY, PATRICK M.,  
Address: 2 ENGEL DRIVE  
City-St-Zip: OCEAN RIDGE, FL

Title: VST ( ) Delete  
Name: CONWAY, VICKIE M.,  
Address: 2 ENGEL DRIVE  
City-St-Zip: OCEAN RIDGE, FL

Title: CEO ( ) Delete  
Name: COPPOLA, VICTOR  
Address: 5720 OLD OCEAN BLVD, #1E  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: AS ( ) Delete  
Name: COPPOLA, CARYL  
Address: 5720 OLD OCEAN BLVD, #1E  
City-St-Zip: OCEAN RIDGE, FL 33435

Title: V ( ) Delete  
Name: CONWAY, TERRENCE M  
Address: 2 ENGEL DRIVE  
City-St-Zip: OCEAN RIDGE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VICKIE M. CONWAY

VST

01/07/2006

Electronic Signature of Signing Officer or Director

Date