

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M29211

FILED
Mar 10, 2009
Secretary of State

Entity Name: PAT CONWAY & ASSOCIATES, INC.

Current Principal Place of Business:

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

Current Mailing Address:

2 ENGLE DRIVE
OCEAN RIDGE, FL 33435

New Principal Place of Business:

1200 S. FEDERAL HIGHWAY
#302
BOYNTON BEACH, FL 33435 US

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 ENGLE 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 ENGLE DRIVE
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VST () Delete
Name: CONWAY, VICKIE M.,
Address: 2 ENGLE DRIVE
City-St-Zip: OCEAN RIDGE, FL 33435

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: 5101 N BRANCH AVENUE
City-St-Zip: TAMPA, FL 33603

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 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: PATRICK M. CONWAY

PC

03/10/2009

Electronic Signature of Signing Officer or Director

_____ Date