

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000070313

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** TIMOTHY W. CONWAY, D.D.S., P.A.

**Current Principal Place of Business:**

2005 THONOTOSASSA RD  
PLANT CITY, FL 33563

**New Principal Place of Business:**

2005 THONOTOSASSA RD  
SUITE A  
PLANT CITY, FL 33563

**Current Mailing Address:**

2005 THONOTOSASSA RD  
PLANT CITY, FL 33563

**New Mailing Address:**

2005 THONOTOSASSA RD  
SUITE A  
PLANT CITY, FL 33563

**FEI Number:** 38-3818387

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONWAY, PAMELA D  
2005 THONOTOSASSA RD  
PLANT CITY, FL 33563 US

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

CONWAY, PAMELA D  
2005 THONOTOSASSA RD  
SUITE A  
PLANT CITY, FL 33563 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:

01/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CONWAY, TIMOTHY W  
Address: 2005 THONOTOSASSA RD  
City-St-Zip: PLANT CITY, FL 33563

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 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 all other like empowered.

SIGNATURE: TIMOTHY W. CONWAY

PRES

01/19/2012

Electronic Signature of Signing Officer or Director

Date