

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000009579

Entity Name: T W ACCOUNTING SERVICES, INC.

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

15312 CARROLLTON LANE  
TAMPA, FL 33612

**New Principal Place of Business:**

**Current Mailing Address:**

15312 CARROLLTON LANE  
TAMPA, FL 33612

**New Mailing Address:**

FEI Number: 59-3289824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHWANKE, TIM  
15312 CARROLLTON LANE  
TAMPA, FL 33612 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SCHWANKE, TIM  
Address: 15312 CARROLLTON LANE  
City-St-Zip: TAMPA, FL 33612

Title: D  
Name: SCHWANKE, LINDA  
Address: 15312 CARROLLTON LN  
City-St-Zip: TAMPA, FL

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: TIM W SCHWANKE

PRES

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date