

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F92289

**Entity Name:** THOMAS L. ROCKWELL, D.D.S., P.A.

**Current Principal Place of Business:**

13930 DALE MABRY HIGHWAY  
SUITE 4  
TAMPA, FL 33618

**Current Mailing Address:**

13930 DALE MABRY HIGHWAY  
SUITE 4  
TAMPA, FL 33618

**FEI Number:** 59-2204424

**Certificate of Status Desired:** No

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

ROCKWELL, THOMAS L., DR.  
13930 N. DALE MABRY HWY.  
SUITE 4  
TAMPA, FL 33618 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

**Officer/Director Detail :**

Title PD  
Name ROCKWELL, THOMAS L  
Address 13930 DALE MABRY HWY  
City-State-Zip: TAMPA, FL 33618

*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:** THOMAS ROCKWELL

PD

04/25/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date