

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000084031

**Entity Name:** THOMAS F. CONROY, M.D., P.A.

**Current Principal Place of Business:**

267 SUNSET DRIVE NORTH  
ST PETERSBURG, FL 33710

**Current Mailing Address:**

267 SUNSET DRIVE NORTH  
ST PETERSBURG, FL 33710

**FEI Number:** 59-3670221

**Certificate of Status Desired:** No

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

TIMMERMAN, J. TODD ESQ  
101 EAST KENNEDY BLVD STE 2800  
TAMPA, FL 33602 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            PRES  
Name            CONROY, THOMAS FMD  
Address        267 SUNSET DRIVE NORTH  
City-State-Zip: ST PETERSBURG FL 33710

*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 F. CONROY MD

**PRESIDENT**

**06/13/2020**

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

\_\_\_\_\_  
Date