

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747442

FILED
Jul 03, 2006
Secretary of State

Entity Name: M. E. IRIS, INC.

Current Principal Place of Business:

5100 HWY 17-92
SUITE 200
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

5100 HWY 12-92
SUITE 200
CASSELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 59-2929779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MANGUM, KEVIN E
5100 HWY 17-92
STE 200
CASSELBERRY, FL 32707 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANGUM, KEVIN E
Address: 5100 HWY 17-92, STE 201
City-St-Zip: CASSELBERRY, FL 32707

Title: VD () Delete
Name: MURPHY, ROBERT J JR
Address: 1061 FOUNTAIN GLEN DR.
City-St-Zip: LAWRENCEVILLE, GA

Title: SD () Delete
Name: JURKOWSKI, TODD
Address: 410 E. JORSEY DR.
City-St-Zip: ORLANDO, FL 32806

Title: VD () Delete
Name: ICKES, GREGG
Address: 1700 WEBER ST.
City-St-Zip: ORLANDO, FL 32803

Title: TD () Delete
Name: MURPHY, BRIAN
Address: 4104 W EL PRADO BLVD
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: JOHNSON, CHRIS
Address: 612 SPARROW BRANCH CIR.
City-St-Zip: JACKSONVILLE, FL 32259

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN MURPHY

TD

07/03/2006

Electronic Signature of Signing Officer or Director

Date