

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003886

FILED  
Feb 22, 2012  
Secretary of State

Entity Name: TEARSCIENCE, INC.

**Current Principal Place of Business:**

5151 MCCRIMMON PARKWAY  
SUITE 250  
MORRISVILLE, NC 27560

**New Principal Place of Business:**

**Current Mailing Address:**

5151 MCCRIMMON PARKWAY  
SUITE 250  
MORRISVILLE, NC 27560

**New Mailing Address:**

FEI Number: 20-3043933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CDP  
Name: WILLIS, TIMOTHY R CEO  
Address: 5151 MCCRIMMON PARKWAY, SUITE 250  
City-St-Zip: MORRISVILLE, NC 27560

Title: S  
Name: HACHIGIAN, JAY  
Address: 610 LINCOLN STREET  
City-St-Zip: WALTHAM, MA 02451

Title: VPT  
Name: WICKER, NICOLE K  
Address: 5151 MCCRIMMON PARKWAY, SUITE 250  
City-St-Zip: MORRISVILLE, NC 27560

Title: D  
Name: LARGENT, JAMES  
Address: 10190 OVERHILL DRIVE  
City-St-Zip: SANTA ANNA, CA

Title: D  
Name: NICKERSON, SAM  
Address: 45 ROCKEFELLER PLAZA  
City-St-Zip: NEW YORK, NY 101110219

Title: D  
Name: THANGARAJ, IMMANUEL  
Address: 335 BRYANT STREET  
City-St-Zip: PALO ALTO, CA 94301

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: NICOLE K. WICKER

VPT

02/22/2012

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

\_\_\_\_\_  
Date