

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006427

FILED  
Feb 17, 2010  
Secretary of State

Entity Name: 3RD EYE, INC.

**Current Principal Place of Business:**

2124 LISTON CT.  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

2124 LISTON CT.  
ORLANDO, FL 32811

**New Mailing Address:**

FEI Number: 37-1429416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELL, LESLIE S  
2124 LISTON CT.  
ORLANDO, FL 32811 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: PD  
Name: BELL, LESLIE S  
Address: 2124 LISTON CT.  
City-St-Zip: ORLANDO, FL 32811

Title: SD  
Name: EVANS, AMORA  
Address: 2124 LISTON CT.  
City-St-Zip: ORLANDO, FL 32811

Title: TD  
Name: BELL, JIMMIE R  
Address: 2124 LISTON CT.  
City-St-Zip: ORLANDO, FL 32811

Title: VPD  
Name: WILCOX, PAMELA D  
Address: 2124 LISTON CT.  
City-St-Zip: ORLANDO, FL 32811

Title: O  
Name: MOSLEY, TERRENCE T  
Address: 934 WILLIE MAYES PARKWAY  
City-St-Zip: ORLANDO, FL 32811

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LESLIE S. BELL

PRES

02/17/2010

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

\_\_\_\_\_  
Date