

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009456

**FILED**  
**Jan 31, 2010**  
**Secretary of State**

**Entity Name:** ETCH A VISION, INC.

**Current Principal Place of Business:**

411 MOSSWOOD BLVD.  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

411 MOSSWOOD BLVD.  
INDIALANTIC, FL 32903

**New Mailing Address:**

**FEI Number:** 20-5556863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MASON, CAROLYN J.  
411 MOSSWOOD BLVD.  
INDIALANTIC, FL 32903 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:** DP  
**Name:** MASON, CAROLYN J.  
**Address:** 411 MOSSWOOD BLVD.  
**City-St-Zip:** INDIALANTIC, FL 32903

**Title:** DS  
**Name:** HAMILTON, KAREN  
**Address:** 341 AVENIDA DEL MAR  
**City-St-Zip:** INDIALANTIC, FL 32903

**Title:** DV  
**Name:** CARSON, NANCY  
**Address:** 100 CAT CAY LANE  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937

**Title:** DT  
**Name:** POWELL, GERTRUDE  
**Address:** 435 OCEAN SPRAY AVE.  
**City-St-Zip:** SATELLITE BEACH, FL 32937

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:** CAROLYN J. MASON

DP

01/31/2010

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

\_\_\_\_\_  
Date