

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000020710

Entity Name: MR CROSSHAIRS INC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4085 HANCOCK BRIDGE PARKWAY  
SUITE 111-319  
NORTH FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

4085 HANCOCK BRIDGE PARKWAY  
SUITE 111-319  
NORTH FORT MYERS, FL 33903

**New Mailing Address:**

FEI Number: 26-4385613

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TILELLI, MATTHEW W  
4085 HANCOCK BRIDGE PARKWAY  
SUITE 111-319  
NORTH FORT MYERS, FL 33903 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: P  
Name: TILELLI, MATTHEW W  
Address: 4085 HANCOCK BRIDGE PARKWAY, #111-319  
City-St-Zip: NORTH FORT MYERS, FL 33903

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: MATTHEW TILELLI

P

04/28/2011

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

\_\_\_\_\_  
Date