

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000069161

FILED  
Apr 09, 2012  
Secretary of State

Entity Name: EYES IT, INC.

**Current Principal Place of Business:**

5425 OAKMONT DRIVE  
PACE, FL 32571 US

**New Principal Place of Business:**

**Current Mailing Address:**

5425 OAKMONT DRIVE  
PACE, FL 32571 US

**New Mailing Address:**

FEI Number: 45-2880115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURKLOW, MELVIN  
5425 OAKMONT DRIVE  
PACE, FL 32571 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 D  
Name: BURKLOW, MELVIN  
Address: 5425 OAKMONT DRIVE  
City-St-Zip: PACE, FL 32571 US

Title: VP D  
Name: KING, KEVIN  
Address: 211 PROGRESS DRIVE  
City-St-Zip: HOHENWALD, TN 38462 US

Title: EVP  
Name: BURKLOW, MICHAEL P  
Address: 240 BEACH DRIVE  
City-St-Zip: CAMDEN, AL 36726 US

Title: STD  
Name: BURKLOW, STEPHEN A  
Address: 2950 GREYSTONE DRIVE  
City-St-Zip: PACE, FL 32571 US

Title: D  
Name: BURKLOW, MICHAEL P  
Address: 240 BEACH DRIVE  
City-St-Zip: CAMDEN, AL 36726 US

Title: D  
Name: BURKLOW, ROBERT L  
Address: 236 WOODMERE DRIVE  
City-St-Zip: HOHENWALD, TN 38462 US

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: MELVIN BURKLOW

PRES

04/09/2012

Electronic Signature of Signing Officer or Director

Date