

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090720

FILED  
Apr 16, 2010  
Secretary of State

**Entity Name:** MULLIS EYE INSTITUTE, INC.

**Current Principal Place of Business:**

1600 JENKS AVENUE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

**Current Mailing Address:**

1600 JENKS AVENUE  
PANAMA CITY, FL 32405

**New Mailing Address:**

**FEI Number:** 59-3286216

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUZNY, DEBORAH  
1600 JENKS AVENUE  
PANAMA CITY, FL 32402 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MULLIS, LEE  
**Address:** P.O. BOX 730 N/A  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** VP  
**Name:** MULLIS, LEE  
**Address:** P.O. BOX 730 N/A  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** S  
**Name:** MULLIS, LEE  
**Address:** P.O. BOX 730 N/A  
**City-St-Zip:** PANAMA CITY, FL 32405

**Title:** T  
**Name:** MULLIS, LEE  
**Address:** P.O. BOX 730 N/A  
**City-St-Zip:** PANAMA CITY, FL 32405

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:** LEE MULLIS

P

04/16/2010

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

\_\_\_\_\_  
Date