2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2011
Secretary of State

DOCUMENT# P95000034733

Entity Name: SIGHT EFFECTS, INCORPORATED

Current Principal Place of Business:

2386 HENRY GREY RD
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

2386 HENRY GREY RD
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 59-3328501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PRESCOTT, SONJA F
2386 HENRY GRAY RD
BONIFAY, FL 32425 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: PS
Name: PRESCOTT, SONJA F
Address: 2386 HENRY GRAY RD
City-St-Zip: BONIFAY, FL 32425

Title: 1VP
Name: POWELL, OWEN N.
Address: 201 N.J.H. ETHERIDGE ST.
City-St-Zip: BONIFAY, FL 32425

Title: 2VP
Name: PRESCOTT, CECIL K
Address: 2382 HENRY GREY RD
City-St-Zip: BONIFAY, FL 32425

Title: 2VP
Name: PRESCOTT, JULIAN K
Address: 4500 A DAVIS RD
City-St-Zip: CARYVILLE, FL 32427

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: SONJA F PRESCOTT PRES 04/30/2011

Electronic Signature of Signing Officer or Director — Date