

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000559

FILED  
Apr 13, 2010  
Secretary of State

Entity Name: EPM CVC GROUP HOLDINGS, INC.

## Current Principal Place of Business:

2020 FRONT STREET, SUITE 100  
CUYAHOGA FALLS, OH 44221

## New Principal Place of Business:

2020 FRONT STREET, SUITE 100  
CUYAHOGA FALLS, OH 44221 US

## Current Mailing Address:

2020 FRONT STREET, SUITE 100  
CUYAHOGA FALLS, OH 44221

## New Mailing Address:

2020 FRONT STREET, SUITE 100  
CUYAHOGA FALLS, OH 44221 US

FEI Number: 26-1624769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DPT  
Name: WAGNER, CANDACE M D P T  
Address: 2020 FRONT STREET, SUITE 100  
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: S VP  
Name: DENISON, BRIAN SECVP  
Address: 2020 FRONT STREET, SUITE 100  
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: DIR  
Name: BRODY, MARK DIR  
Address: 2020 FRONT STREET, SUITE 100  
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: DIR  
Name: FINNEGAN, DAVID DIR  
Address: 2020 FRONT STREET, SUITE 100  
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

Title: DIR  
Name: FINNIGAN, DAVID DIR  
Address: 2020 FRONT STREET, SUITE 100  
City-St-Zip: CUYAHOGA FALLS, OH 44221 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: LAURA LOUIS

POA

04/13/2010

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

\_\_\_\_\_ Date