

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000559

FILED
Apr 09, 2011
Secretary of State

Entity Name: EPM CVC GROUP HOLDINGS, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

OFFICERS AND DIRECTORS:

Title: DPTC
Name: WAGNER, CANDACE M
Address: 2020 FRONT STREET, SUITE 100
City-St-Zip: CUYAHOGA FALLS, OH 44221 US

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

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

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

Title: DIR
Name: FINNIGAN, DAVID
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

_____ Electronic Signature of Signing Officer or Director

POA

04/09/2011

_____ Date