

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90087 012 ***150.00

DOCUMENT # **P97000057236**

1. Entity Name
EPI CALYPSO CAY APARTMENTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
250 INTERNATIONAL PARKWAY **250 INTERNATIONAL PARKWAY**
SUITE 150 **SUITE 150**
HEATHROW FL 32746 **HEATHROW FL 32746**
US **US**

2. Principal Place of Business 3. Mailing Address
359 Carolina Avenue **359 Carolina Avenue**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Winter Park, FL **Winter Park, FL**

Zip Country Zip Country
32789 **Orange** **32789** **Orange**

4. FEI Number Applied For
59-3458285 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SELBY, C. THOMAS
250 INTERNATIONAL PARKWAY
SUITE 150
HEATHROW FL 32746

7. Name and Address of New Registered Agent
 Name
Grant Downing
 Street Address (P.O. Box Number is Not Acceptable)
222 West Comstock Ave.
Suite 101
 City Zip Code
Winter Park **32789**

8. 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 *Grant T. Downing* DATE *4/16/01*
 Signature, typed name of registered agent or director Date of registration

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	SELBY, C. THOMAS	
STREET ADDRESS	250 INTERNATIONAL PARKWAY SUITE 150	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Selby, C. Thomas	
STREET ADDRESS	300 International Pky., Ste.130	
CITY-ST-ZIP	Heathrow, FL 32746	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE: *Grant T. Downing* DATE: *4-2-01* *4071333-1604*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date of Filing

CR2E034 (10/00)