

# 2001 UNIFORM BUSINESS REPORT (UBR)

0048257

DOCUMENT # P97000103281

1. Entity Name

EPI OSCEOLA, INC.

FILED

01 APR 23 AM 9:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

250 INTERNATIONAL PKWY  
SUITE 150  
HEATHROW FL 32746

Mailing Address

250 INTERNATIONAL PKWY  
SUITE 150  
HEATHROW FL 32746

2. Principal Place of Business

359 Carolina Avenue

Suite, Apt. #, etc.

3. Mailing Address

359 Carolina Avenue

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Winter Park, FL

City & State

Winter Park, FL

4. FEI Number

59-3485969

Applied For

Not Applicable

Zip

32789

Country

Orange

Zip

32789

Country

Orange

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SELBY, C. THOMAS  
250 INTERNATIONAL PKWY  
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)  
**Godbold, Downing, Sheahan & Bill, P.A.**  
**222 W. Comstock Ave., Suite 101**  
City **Winter Park** FL Zip Code **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*  
**GRANT T. DOWNING**

4/26/01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**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  Delete  
NAME **D SELBY, C. THOMAS**  
STREET ADDRESS **250 INTERNATIONAL PKWY STE 150**  
CITY-ST-ZIP **HEATHROW FL 32746**

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  Change  Addition  
NAME **Selby, C. Thomas**  
STREET ADDRESS **300 International Pky., Ste. 130**  
CITY-ST-ZIP **Heathrow, FL 32746**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**300004081979--0**  
**-04/26/01--01092--001**  
**\*\*\*\*150.00 \*\*\*\*150.00**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  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)(i), 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-01

Date

407/333-1604

Daytime Phone #

CR2E034 (10/00)