

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000048315

FILED
Feb 18, 2009
Secretary of State

Entity Name: EPI SOUTHBRIDGE, INC.

Current Principal Place of Business:

300 INTERNATIONAL PARKWAY, SUITE 300
HEATHROW, FL 32746

New Principal Place of Business:

359 CAROLINA AVE
WINTER PARK, FL 32789

Current Mailing Address:

300 INTERNATIONAL PARKWAY, SUITE 300
HEATHROW, FL 32746

New Mailing Address:

359 CAROLINA AVE
WINTER PARK, FL 32789

FEI Number: 59-3580695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, SELBY C
300 INTERNATIONAL PARKWAY
SUITE 300
HEATHROW, FL 32746 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: D () Delete
Name: SELBY, C THOMAS
Address: 300 INTERNATIONAL PKWY STE 300
City-St-Zip: HEATHROW, FL 32746

Title: D () Delete
Name: PUGH, JAMES H JR
Address: 359 CAROLINA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: JACOBY, GREG
Address: 359 CAROLINA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: RIVA, KYLE
Address: 359 CAROLINA AVE
City-St-Zip: WINTER PARK, FL 32789

Title: VP () Delete
Name: BRADLEY, STEPHEN W
Address: 359 CAROLINA AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GREG JACOBY

D

02/18/2009

Electronic Signature of Signing Officer or Director

_____ Date