

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2002 8:00 am
Secretary of State

03-18-2002 90078 043 ****61.25

DOCUMENT # 727714

1. Entity Name

EPIC COMMUNITY SERVICES, INC.

Principal Place of Business

**1400 OLD DIXIE HIGHWAY
C
ST. AUGUSTINE FL 32084
US**

Mailing Address

**1400 OLD DIXIE HIGHWAY
C
ST. AUGUSTINE FL 32084
US**

2. Principal Place of Business

1400 Old Dixie Highway

Suite, Apt. #, etc.

3. Mailing Address

1400 Old Dixie Highway

Suite, Apt. #, etc.

City & State
St. Augustine FL

City & State
St. Augustine FL

Zip
32084

Country
USA

Zip
32084

Country
USA

4. FEI Number
59-1502582

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GREENOUGH PATRICIA
88 RIBERIA STREET
SUITE 300
ST. AUGUSTINE FL 32084**

7. Name and Address of New Registered Agent

Name

Street Address (P.O., Box Number is Not Acceptable)
1400 Old Dixie Highway

City
St. Augustine

FL

Zip Code
32084

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
P
NAME
MORTON, TOM
STREET ADDRESS
961 LEW BLVD
CITY-ST-ZIP
SAINT AUGUSTINE FL 32084

☐ Delete

TITLE
D
NAME
ROBINSON, WILLIAM
STREET ADDRESS
231 CIRCLE DRIVE EAST
CITY-ST-ZIP
ST AUGUSTINE FL

☒ Delete

TITLE
D
NAME
CHRISTINE, ALEX
STREET ADDRESS
25 RIBERIA ST
CITY-ST-ZIP
ST AUGUSTINE FL 32084

☐ Delete

TITLE
T Director
NAME
PHILLIPS, FLOYD
STREET ADDRESS
625 CR 13 SOUTH
CITY-ST-ZIP
SAINT AUGUSTINE FL 32092

☐ Delete

TITLE
M
NAME
GREENOUGH, PATRICIA
STREET ADDRESS
88 RIBERIA STREET SUITE 300
CITY-ST-ZIP
ST AUGUSTINE FL

☐ Delete

TITLE
VP
NAME
BELL, H J
STREET ADDRESS
3 VERSAGGI DR
CITY-ST-ZIP
SAINT AUGUSTINE FL 32084

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
Treasurer
NAME
Patrick T. Canan
STREET ADDRESS
43 Cincinnati St.
CITY-ST-ZIP
St. Augustine, FL 32084

☐ Change

☒ Addition

TITLE
Finance Director
NAME
Ann Brown
STREET ADDRESS
1400 Old Dixie Highway
CITY-ST-ZIP
St. Augustine, FL 32084

☐ Change

☒ Addition

TITLE
Director
NAME
Director
STREET ADDRESS
Director
CITY-ST-ZIP
Director

☐ Change

☐ Addition

TITLE
Director
NAME
Director
STREET ADDRESS
Director
CITY-ST-ZIP
Director

☒ Change

☐ Addition

TITLE
Director
NAME
Director
STREET ADDRESS
Director
CITY-ST-ZIP
Director

☒ Change

☐ Addition

TITLE
Director
NAME
Director
STREET ADDRESS
Director
CITY-ST-ZIP
Director

☐ Change

☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ann Brown
Ann Brown
FINANCE DIRECTOR

2/26/02

904-829-2273

Date

Daytime Phone #

CR2E037 (9/01)