

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727714

**Entity Name:** EPIC COMMUNITY SERVICES, INC.**Current Principal Place of Business:**3910 LEWIS SPEEDWAY, STE. 1106  
ST. AUGUSTINE, FL 32084**Current Mailing Address:**3910 LEWIS SPEEDWAY, STE. 1106  
ST. AUGUSTINE, FL 32084 US**FEI Number:** 59-1502582**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GREENOUGH, PATRICIA  
3910 LEWIS SPEEDWAY, STE. 1106  
ST. AUGUSTINE, FL 32084 US*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

**Officer/Director Detail :**

Title	SECRETARY
Name	WELU, JAMIE
Address	500 WORLD COMMERCE PARKWAY
City-State-Zip:	SAINT AUGUSTINE FL 32092

Title	PRESIDENT
Name	PULSFUS, ERIC M.D.
Address	26 SANCHEZ AVE.
City-State-Zip:	ST. AUGUSTINE FL 32084

Title	VP
Name	MORGAN, VIRGINIA
Address	2801 N. THIRD ST.
City-State-Zip:	ST. AUGUSTINE FL 32084

Title	CEO
Name	GREENOUGH, PATRICIA
Address	3910 LEWIS SPEEDWAY, STE. 1106
City-State-Zip:	SAINT AUGUSTINE FL 32084

Title	PAST PRESIDENT
Name	MOWREY, DANIEL A.
Address	2801 NORTH THIRD STREET
City-State-Zip:	ST. AUGUSTINE FL 32084

Title	TREASURER
Name	PRIOLEAU, M.D., JOHN
Address	400 HEALTH PARK BLVD., STE. 300
City-State-Zip:	SAINT AUGUSTINE FL 32086

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PATRICIA GREENOUGH****CHIEF EXECUTIVE  
OFFICER****01/19/2023**

Electronic Signature of Signing Officer/Director Detail

Date