

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 505471

FILED  
Apr 06, 2012  
Secretary of State

Entity Name: EPIC COMMUNITIES, INC.

**Current Principal Place of Business:**

11836 ISELLE DRIVE  
ORLANDO, FL 32827 US

**New Principal Place of Business:**

**Current Mailing Address:**

11836 ISELLE DRIVE  
ORLANDO, FL 32827 US

**New Mailing Address:**

FEI Number: 59-1676764      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIMERCURIO, SEAN N  
11836 ISELLE DRIVE  
ORLANDO, FL 32827 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DIMERCURIO, CHRISTOPHER J  
Address: 11836 ISELLE DRIVE  
City-St-Zip: ORLANDO, FL 32827

Title: DPST  
Name: DIMERCURIO, SEAN N  
Address: 11836 ISELLE DRIVE  
City-St-Zip: ORLANDO, FL 32827

Title: D  
Name: LOPEZ, JOANNE M  
Address: 11836 ISELLE DRIVE  
City-St-Zip: ORLANDO, FL 32827

Title: D  
Name: DIMERCURIO, ALBERT A  
Address: 11836 ISELLE DRIVE  
City-St-Zip: ORLANDO, FL 32827

Title: D  
Name: DIMERCURIO, ANTHONY J  
Address: 11836 ISELLE DRIVE  
City-St-Zip: ORLANDO, FL 32827

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

SIGNATURE: SEAN N DIMERCURIO

DPST

04/06/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date