

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604195

Entity Name: EPOC CLINIC, INC.

FILED
Mar 18, 2004
Secretary of State

Current Principal Place of Business:

609 VIRGINIA DR.
ORLANDO, FL 328038844

New Principal Place of Business:

Current Mailing Address:

609 VIRGINIA DR.
ORLANDO, FL 328038844

New Mailing Address:

FEI Number: 59-1458054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENDERGRAFT, JAMES S
1103 LUCERNE TERR
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

WEATHERFORD, WILLIAM P JR
1150 LOUISIANA AVENUE
SUITE 4
WINTER PARK, FL 32789 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: WILLIAM P WEATHERFORD, JR

03/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PENDERGRAFT, JAMES S IV, MD
Address: 1103 LUCERNE TERRACE
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PENDERGRAFT, JAMES S IV, MD
Address: 1103 LUCERNE TERRACE
City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES S PENDERGRAFT

PRES

03/18/2004

Electronic Signature of Signing Officer or Director

Date