2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000559

Entity Name: EPM CVC GROUP HOLDINGS, INC.

FILED Apr 04, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
2020 FRONT ST., SUITE 100 CUYAHOGA FALLS, OH 44221				2020 FRONT STREET, SUITE 100 CUYAHOGA FALLS, OH 44221			
Current Mailing Address:				New Mailing Address:			
2020 FRONT ST., SUITE 100 CUYAHOGA FALLS, OH 44221				2020 FRONT STREET, SUITE 100 CUYAHOGA FALLS, OH 44221			
FEI Number:	26-1624769	FEI Number Applied For ()	FEI Nur	nber Not Appli	icable ()	Certificate o	of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:							
	Electroni		Date				
Election Carr	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEOP () I HOLLERAN, THO 2020 FRONT ST CUYAHOGA FAL	., SUITE 100		Title: Name: Address: City-St-Zip:		(X) Change()A RIAN T STREET, SUITE FALLS, OH 442	E 100
Title: Name: Address: City-St-Zip:	WAGNER, CAND	NTER CIR., SUITE 600		Title: Name: Address: City-St-Zip:		(X) Change () A CANDACE M F STREET, SUITE FALLS, OH 442	E 100
Title: Name: Address: City-St-Zip:	BRODY, MARK	Delete NTER CIR., SUITE 600 L 33486		Title: Name: Address: City-St-Zip:		(X) Change()/ RK 「STREET, SUIT! FALLS, OH 442	E 100
Title: Name: Address: City-St-Zip:	S () I MOORE, MICHA 2020 FRONT ST CUYAHOGA FAL	., SUITE 100		Title: Name: Address: City-St-Zip:		(X) Change(), RIAN T STREET, SUITE FALLS, OH 442	E 100
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:		() Change (X) CANDACE M T STREET, SUITE FALLS, OH 442	E 100
Title: Name: Address: City-St-Zip:	()1	Delete		Title: Name: Address: City-St-Zip:		() Change (X) A DAVID I STREET, SUITE FALLS, OH 442	E 100

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: LAURA LOUIS POA 04/04/2009