## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS Mar 04, 1999 8:00 am Secretary of State 03-04-1999 90044 033 \*\*\*150.00

## DOCUMENT # H72061 1. Corporation Name

EPI SYSTEMATICS, INC.

	.c.ii.(1100), ii.(0)				
Principal Place	of Business	Mailing Address			
2711 PARK WIN	DSOR DR., #304 33901	2711 PARK WINDSOR DR. ( FT. MYERS FL 33901	#304		· ·
1,11 11 4 4 2 2 1 2 2				<u> </u>	IN-THIS SPACE
				3. Date Incorporated or Qualifed 08/20/1985	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3874	l S.E. 13th Place	2 26 P.O. BOX 6	<i>v</i> 233_	59-2576030	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	See Required
City & State	,	City & State		6. Election Campaign Financing	55.00 May Be
23 Cape	Coral FL	28 Ft. Myers	Country	Trust Fund Contribution  8. This corporation owes the currer	Added to Fees
24 339	04 25 USA	29 33906-62		Personal Property Tax.	☐ Yes 🔀 No
	9. Name and Address of Curren	t Registered Agent	-	10. Name and Address of New Re	gistered Agent
DOLL	EV MANOV A		81 Name	olley Mancy A	7.
	EY, NANCY A		82 Street	Address (P.O. Box Number is Not acceptable	le)
	PARK WINDSOR DR., #304		387	14 S.E. 13th PIAC	<u>e</u>
FUR	F MYERS FL 33901		83		
			84 0/7	oe Corai	FL 85 33904
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named	corporation submits this statement for the pr	urpose of changing its registered
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was au	thorized by the corpo	oration's board of directors. I hereby accept	the appointment as registered
- '	with, and accept the same	O Pa	<del></del>		2-11,99
SIGNATURE	Stignature, pood or printer hame of registered ager	it and title if applicable (NOTE: I	Registered Agent signature re	equired when reinstating)	DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PD	☐ DELETE	4.4 7070 5		Change Addition
NAME	ZELLNER, STEPHEN R		1.1 TITLE		Charige D Addition
STREET ADDRESS			1.1 IIILE 1.2 NAME:		
	2711 PARK WINDSOR DR., #3			2015 Winkler A	
CITY-ST-ZIP	2711 PARK WINDSOR DR., #3		1.2 NAME	awns Winkler A Ft. Muers. FL	
CITY-ST-ZIP	2711 PARK WINDSOR DR., #3 FT. MYERS FL 33901		1.2 NAME 1.3 STREET ADDRESS	auns Winkler F. Ft. Myers, FL	
TITLE	2711 PARK WINDSOR DR., #3 FT. MYERS FL 33901 STD	04	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY+ST-ZIP	Ft. Myers, FC	Ovenue 33901
TITLE NAME	2711 PARK WINDSOR DR., #3 FT. MYERS FL 33901 STD POLLEY, NANCY A	04 □ DELETE	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	Ft. Myers, FC	Ovenue 33901 Change Addition
TITLE NAME STREET ADDRESS	2711 PARK WINDSOR DR., #3 FT. MYERS FL 33901 STD POLLEY, NANCY A 2711 PARK WINDSOR DR., #3	04 □ DELETE	1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME	alons Winkler F. Ft. Myers, FL 3874 S.E. 13th Pl CAPC Coral, FL	Ovenue 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2711 PARK WINDSOR DR., #3 FT. MYERS FL 33901 STD POLLEY, NANCY A	04 □ DELETE	1.2 NAME : 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	Ft. Myers, FC	Ovenue 33901 Change Addition
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14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

NING OFFICER OR DIRECTOR

941-541-1038