

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K91983

Entity Name: EPIX I, INC.

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

3615 MADACA LANE
TAMPA, FL 33618

New Principal Place of Business:

P. O. BOX 1308
PONTE VEDRA BEACH, FL 32004 US

Current Mailing Address:

3615 MADACA LANE
TAMPA, FL 33618

New Mailing Address:

P. O BOX 1308
PONTE VEDRA BEACH, FL 32004 US

FEI Number: 59-2961796

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEPHERDSON, EDWIN
3615 MADACA LANE
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

MCCORMICK, JAMES C
93 PLAYERS CLUB VILLAS
PONTE VEDRA BEACH, FL 32082 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: JAMES C. MCCORMICK

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V/T () Delete
Name: SHEPARDSON, EDWIN
Address: 3615 MADARA LANE
City-St-Zip: TAMPA, FL 33618

Title: V/S (X) Delete
Name: TROISE, ALEX
Address: 980 POST ROAD EAST
City-St-Zip: WESTPORT, CT 06880

Title: P/D (X) Delete
Name: NELSON, GARRY
Address: 207 COMMERCIAL AVENUE
City-St-Zip: PITTSBURGH, PA 15215

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NELSON, GARRY
Address: 109 BRILLIANT AVE
City-St-Zip: PITTSBURGH, PA 15215 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES C MCCORMICK

RA

04/28/2007

Electronic Signature of Signing Officer or Director

Date