

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041722

FILED
Apr 11, 2007
Secretary of State

Entity Name: EPIC INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

928 LAKE MARION DR
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

PO BOX 151234
ALTAMONTE SPRINGS, FL 32715

New Mailing Address:

FEI Number: 20-0345582 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

YARCKIN, ELLEN
928 LAKE MARION DR
ALTAMONTE SPRINGS, FL 32701 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: YARCKIN BRANDON, RYAN B
Address: 928 LAKE MARION DR
City-St-Zip: ALTAMONTE SPRINGS, FL US

Title: MGR () Delete
Name: YARKIN, ELLEN
Address: 928 LAKE MARION DR
City-St-Zip: ALTAMONTE SPRINGS, FL US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: YARCKIN, BRANDON S
Address: 928 LAKE MARION DR
City-St-Zip: ALTAMONTE SPRINGS, FL US

Title: MGR (X) Change () Addition
Name: YARCKIN, ELLEN
Address: 928 LAKE MARION DR
City-St-Zip: ALTAMONTE SPRINGS, FL US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRANDON YARCKIN

MGRM

04/11/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date