

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000049533

Entity Name: EPI-WILDFLOWER, LLC

**FILED**  
**Jan 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

359 CAROLINA AVENUE  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

359 CAROLINA AVENUE  
SUITE #200  
WINTER PARK, FL 32789 US

**Current Mailing Address:**

359 CAROLINA AVENUE  
WINTER PARK, FL 32789 US

**New Mailing Address:**

359 CAROLINA AVENUE  
SUITE #200  
WINTER PARK, FL 32789 US

FEI Number: 20-0145333

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DOWNING, GRANT T  
222 WEST COMSTOCK AVENUE  
SUITE 101  
WINTER PARK, FL 32789 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  
Name: PUGH, JAMES H JR  
Address: 359 CAROLINA AVENUE, SUITE #200  
City-St-Zip: WINTER PARK, FL 32789 US

Title: MGRM  
Name: JACOBY, GREG  
Address: 359 CAROLINA AVENUE, SUITE #200  
City-St-Zip: WINTER PARK, FL 32789 US

Title: MGRM  
Name: RIVA, KYLE D  
Address: 359 CAROLINA AVENUE, SUITE #200  
City-St-Zip: WINTER PARK, FL 32789 US

Title: MGRM  
Name: SAND, MEREDITH  
Address: 359 CAROLINA AVE, SUITE #200  
City-St-Zip: WINTER PARK, FL 32789

I hereby 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: GREG JACOBY

MGRM

01/16/2010

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