2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 12, 2005 8:00 am Secretary of State DOCUMENT # P03000088157 04-12-2005 90132 034 ***150.00 EPIC BUILDING & DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 13180 N CLEVELAND AVENUE STE 130 FT MYERS FL 33903 13180 N CLEVELAND AVENUE STE 130 FT MYERS FL 33903 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 65-1200500 Not Applicable Zip Country Country Ζiρ \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent THOMPSON, RICHARD T 13180 N CLEVELAND AVE STE 130 NORTH FORT MYERS FL 33903 for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar 8. The above named entity submits this sta the obligations of registered agent. Santillo SIGNATURE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition Change TITLE Delete TITLE BARKER, JOHN W JR NAME NAME 13180 N CLEVELAND AVENUE STE 130 STREET ADDRESS STREET ADDRESS FT MYERS FL 33903 CHY-ST-ZIP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE BILE SANTILLO, RALPH NAME STREET ADDRESS 13180 N CLEVELAND AVENUE STE 130 STREET ADDRESS CITY-ST-ZIP FT MYERS FL 33903 CITY-ST-ZIP Change __ Delete TITLE Addition TITLE THOMPSON, RICHARD NAME NAME 13180 N CLEVELAND AVENUE STE 130 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT MYERS FL 33903 CITY-ST-ZIP ☐ Change Addition TIT? F TITLE ☐ Delete Allen Wasko 13180 N. Cleveland Ave. STE 130 NAME NAME STREET ADDRESS STREET ADDRESS Ft. Myers, FL. 33903 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of trustee embowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an outcome.

Calph Santillo

ME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED