

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057588

Entity Name: EPI 04, INC.

FILED
Mar 18, 2009
Secretary of State

Current Principal Place of Business:

270 CROSSWAY ROAD
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6566
TALLAHASSEE, FL 323146566

New Mailing Address:

FEI Number: 20-1030713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIST, MICHAEL P
1300 THOMASWOOD DRIVE
TALLAHASSEE, FL 32308 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SKAGFIELD, HILMAR O
Address: 6197 PROCTOR ROAD
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD () Delete
Name: GARTON, GLENN E
Address: 2972 COMPTON COURT
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD () Delete
Name: HUGHES, WILLIAM J
Address: 1431 AVONDALE COURT
City-St-Zip: TALLAHASSEE, FL 32317

Title: VD () Delete
Name: SHEEHY, GREG
Address: 270 CROSSWAY ROAD
City-St-Zip: TALLAHASSEE, FL 32314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: WILLIAM HUGHES

TD

03/18/2009

Electronic Signature of Signing Officer or Director

Date