


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P27044</b> 1. Entity Name EPICOR INDUSTRIES, INC.	
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Principal Place of Business 6450 PIE AVENUE, STE 109 DAYTON, OH 45414 US	Mailing Address 1551 WEWATTA ST MAIL CODE 90-A4 DENVER, CO 80202 US
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**DO NOT WRITE IN THIS SPACE**



04122007 No Chg-P CR2E034 (11/05)

4. FEI Number 36-3672434	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
 1200 S PINE ISLAND RD  
 PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000721499  
 05/01/07-80148-008 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CERVELLI, RONALD J 3200 PARKER DRIVE SAINT AUGUSTINE, FL 32084
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT DISSER, DANIEL J 6450 POE AVENUE, STE 109 DAYTON, OH 45414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SULLIVAN, KATHLEEN A 1551 WEWATTA ST DENVER, CO 80202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS PROCOPIO, JOSEPH C 1551 WEWATTA ST DENVER, CO 80202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PAPPAYLIOU, GEORGE S 6450 POE AVENUE, STE 109 DAYTON, OH 45414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARROLL, DAVID 100 KING ST W 6600 1 1ST CANADIAN PL TORONTO, ON m5x 1b8

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph C. Procopio* **Joseph C. Procopio** *4/16/07* **303-744-4216**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ASST SECY Date Daytime Phone \*