


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P95000049067 (8) 1. Corporation Name EP DEVELOPMENT CORP.		



Principal Place of Business 730 COMMERCE DR VENICE FL 34292 US	Mailing Address 730 COMMERCE DR VENICE FL 34292 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2822 NORWOOD LANE Suite, Apt. #, etc. 22		2a. Mailing Address 26 2822 NORWOOD LANE Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 06/22/1995	
City & State 23 VENICE FL Zip 24 34292		City & State 28 VENICE FL Zip 29 34292		4. FEI Number 65-0593079 Applied For <input type="checkbox"/> Not Applicable	
Country 25 USA		Country 30 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent MURPHY, BOB 730 COMMERCE DR VENICE FL 34292				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KORSZEN, DOROTHY	1.2 NAME	
STREET ADDRESS	2080 LARSON STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KORSZEN, BOGIE	2.2 NAME	
STREET ADDRESS	2080 LARSON STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY, ROBERT T	3.2 NAME	
STREET ADDRESS	2822 NORWOOD LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY, VICKIE H	4.2 NAME	
STREET ADDRESS	2822 NORWOOD LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY, GERALD	5.2 NAME	
STREET ADDRESS	421 SHAMROCK DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34292	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURPHY, MYRIAM L	6.2 NAME	
STREET ADDRESS	2030 WHITE FEATHER LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NOKOMIS FL 34275	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE **Robert T. Murphy** 5-18-98 941-184-7878

CR2E034 (1097)