

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000049067

1. Entity Name
EP DEVELOPMENT CORP.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90206 026 ***150.00

Principal Place of Business
2822 NORWOOD LANE
VENICE FL 34292
US

Mailing Address
2822 NORWOOD LANE
VENICE FL 34292-2415
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
908 WESTPARK DR.

3. Mailing Address
Suite, Apt. #, etc.
908 WESTPARK DR.

City & State
CELEBRATION FL

City & State
CELEBRATION FL

Zip
34747

Country
USA

Zip
34747

Country
USA

4. FEI Number 65-0593079

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MURPHY, BOB
2822 NORWOOD LANE
VENICE FL 34292

Name
BOB MURPHY

Street Address (P.O. Box Number is Not Acceptable)
908 WESTPARK DR.

City
CELEBRATION FL

Zip Code
34747

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.

SIGNATURE Robert T. Murphy ROBERT T. MURPHY PRESIDENT 2-29-00

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	KORSZEN, DOROTHY	2060 LARSON STREET	ENGLEWOOD FL	<input type="checkbox"/>
D	KORSZEN, BOGIE	2060 LARSON STREET	ENGLEWOOD FL	<input type="checkbox"/>
D	MURPHY, ROBERT T.	2822 NORWOOD LANE	VENICE FL	<input type="checkbox"/>
D	MURPHY, VICKIE H	2822 NORWOOD LANE	VENICE FL	<input type="checkbox"/>
D	MURPHY, GERALD	421 SHAMROCK DRIVE	VENICE FL 34292	<input type="checkbox"/>
D	MURPHY, MYRIAM L	2030 WHITE FEATHER LANE	NOKOMIS FL 34275	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	P/D MURPHY, ROBERT T.	908 WESTPARK DR.	CELEBRATION FL 34747	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	D MURPHY, VICKIE H	908 WESTPARK DR.	CELEBRATION FL 34747	<input checked="" type="checkbox"/>	<input type="checkbox"/>

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert T. Murphy ROBERT T. MURPHY 2-29-00 407-566-0622

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)