

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000056820

FILED  
May 15, 2005  
Secretary of State

Entity Name: EPOCH MANAGEMENT CONSULTING, INC.

**Current Principal Place of Business:**

4630 N. UNIVERSITY DR., SUITE 3770  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

4630 N. UNIVERSITY DR., SUITE 3770  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 65-0847255      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HUSTON, CRAIG D  
5242 NW 92ND LN  
CORAL SPRINGS, FL 33067      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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: HUSTON, CRAIG D  
Address: 5242 NW 92ND LN  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: V      ( ) Delete  
Name: HUSTON, MADELYN  
Address: 5242 NW 92ND LN  
City-St-Zip: CORAL SPRINGS, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: CRAIG D. HUSTON

PRES

05/15/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date