


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90425 050 ***158.75

DOCUMENT # F99000005977


1. Entity Name
EPIK COMMUNICATIONS INCORPORATED



Principal Place of Business ATTN: GENERAL COUNSEL 444 HIGH ST., SUITE 400 PALO ALTO, CA 94301	Mailing Address ATTN: SEAN DOHERTY/ODYSSEY 444 HIGH ST., SUITE 400 PALO ALTO, CA 94301
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DO NOT WRITE IN THIS SPACE

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03292007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3575654	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 FORT LAUDERDALE, FL 33324**

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS DOHERTY, SEAN P 444 HIGH ST., SUITE 400 PALO ALTO, CA 94301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO STOCKWELL, JOSEPH 444 HIGH ST., SUITE 400 PALO ALTO, CA 94301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Sean P. Doherty
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07 650-470-7508
Date Daytime Phone #