

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001636

FILED
Apr 25, 2007
Secretary of State

Entity Name: ORANGE INDUSTRIAL SERVICES, INC.

Current Principal Place of Business:

777 DOHENY CT
NORTHVILLE, MI 48167

New Principal Place of Business:

Current Mailing Address:

P O BOX 433
NORTHVILLE, MI 48167 US

New Mailing Address:

FEI Number: 38-3335833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNAAK, ROGER
202 NOTTINGHAM WAY
DAVENPORT, FL 33837 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: DOHENY, JACK L
Address: 777 DOHENY CT
City-St-Zip: NORTHVILLE, MI 48167

Title: CEO () Delete
Name: DOHENY, JACK L
Address: 777 DOHENY CT
City-St-Zip: NORTHVILLE, MI 48167

Title: DP () Delete
Name: KNAAK, ROGER
Address: 202 NOTTINGHAM WAY
City-St-Zip: DAVENPORT, FL 33837

Title: DST () Delete
Name: SNYDER, KAY
Address: 40311 SUNBURY
City-St-Zip: NORTHVILLE, MI 48167

Title: VP () Delete
Name: WEBER, DANIEL J
Address: PO BOX 609
City-St-Zip: NORTHVILLE, MI 48167

Title: VP () Delete
Name: WILSON, PAUL
Address: PO BOX 433
City-St-Zip: NORTHVILLE, MI 48167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: NIEMAN, KATHERINE H
Address: PO BOX 609
City-St-Zip: NORTHVILLE, MI 48167

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KATHERINE H NIEMAN

VP

04/25/2007

Electronic Signature of Signing Officer or Director

Date