

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000099820

**Entity Name:** ORIENT POINT CONSULTING LLC

**Current Principal Place of Business:**

2839 WINDRIDGE DR.  
HOLIDAY, FL 34691

**Current Mailing Address:**

2839 WINDRIDGE DR.  
HOLIDAY, FL 34691

**FEI Number: 06-1707193**

**Certificate of Status Desired: No**

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

STIER-MEYER, MARY A  
2839 WINDRIDGE DRIVE  
HOLIDAY, FL 34691 US

*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

**Authorized Person(s) Detail :**

Title	MGRM	Title	DIRECTOR
Name	STIER-MEYER, MARY A	Name	MEYER, GARY
Address	2839 WINDRIDGE DR.	Address	2839 WINDRIDGE DR.
City-State-Zip:	HOLIDAY FL 34691	City-State-Zip:	HOLIDAY FL 34691

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MARY STIER-MEYER**

**MGRM**

**01/13/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date