2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003153

Entity Name: ORIENT LINES, LTD. CO.

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1170 CELEBRATION BLVD, SUITE 200 1111 N ORANGE AVE CELEBRATION, FL 34747 SUITE 1200

ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

1170 CELEBRATION BLVD, SUITE 200 P.O.BOX 470275

CELEBRATION, FL 34747 CELEBRATION, FL 34747

FEI Number: 98-0588266 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JOHNSON, SCOTT E 111 N ORANGE AVE SUITE 1200 ORLANDO, FL 32801 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 HELLER, WAYNE
 Name:
 HELLER, WAYNE

 Address:
 804 GOLFPARK DRIVE
 Address:
 P.O. BOX 470473

 City-St-Zip:
 CELEBRATION, FL 34747
 City-St-Zip:
 CELEBRATION, FL 34747

Title: DVPS () Delete Title: DVPS (X) Change () Addition

 Name:
 HELLER, JUDY
 Name:
 HELLER, JUDY

 Address:
 804 GOLFPARK DRIVE
 Address:
 P.O. BOX 470473

 City-St-Zip:
 CELEBRATION, FL 34747
 City-St-Zip:
 CELEBRATION, FL 34747

Title: T () Delete Title: T (X) Change () Addition

 Name:
 HELLER, JUDY
 Name:
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 Address:
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 P.O. BOX 470473

 City-St-Zip:
 CELEBRATION, FL 34747
 City-St-Zip:
 CELEBRATION, FL 34747

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: WAYNE HELLER DP 01/12/2009