

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G85982

Entity Name: ORION RESEARCH, INC.

FILED
Apr 20, 2006
Secretary of State

Current Principal Place of Business:

C/O DONALD JAMES LINDSTROM
3395 EXCALIBUR WAY
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

C/O DONALD JAMES LINDSTROM
3395 EXCALIBUR WAY
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 59-2379425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDSTROM, DONALD JAMES
3395 EXCALIBUR WAY
JACKSONVILLE, FL 32223 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: DP () Delete
Name: LINDSTROM, DONALD JA, MES
Address: 3395 EXCALIBUR WAY
City-St-Zip: JACKSONVILLE, FL

Title: DT () Delete
Name: SHEA, CAROL ANN,
Address: 13600 EMERALD COVE CT
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: SHEA, VINCENT
Address: 13600 EMERALD COVE COURT
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: SHEA,, CAROL ANN
Address: 11709 MERRA LEE COURT
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change () Addition
Name: SHEA, VINCENT
Address: 11709 MERRA LEE COURT
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD JAMES LINDSTROM

DP

04/20/2006

Electronic Signature of Signing Officer or Director

_____ Date