

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G85982

Entity Name: ORION RESEARCH, INC.

FILED  
Apr 18, 2011  
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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: LINDSTROM, DONALD JAMES  
Address: 3395 EXCALIBUR WAY  
City-St-Zip: JACKSONVILLE, FL 32223

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

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 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 all other like empowered.

SIGNATURE: DONALD JAMES LINDSTROM

DP

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date