

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90033 019 ***150.00

DOCUMENT # J15270

1. Entity Name

ORION ENGINEERING, INC.

Principal Place of Business

2165 SUNNYDALE BLVD STE M
 CLEARWATER FL 33765
 US

Mailing Address

2165 SUNNYDALE BLVD STE M
 CLEARWATER FL 33765
 US

2. Principal Place of Business

2101 Sunnydale Blvd.

3. Mailing Address

2101 Sunnydale Blvd.

Suite, Apt. #, etc.

Suite C

Suite, Apt. #, etc.

Suite C

City & State

Clearwater, FL

City & State

Clearwater, FL

Zip

33765

Country

US

Zip

33765

Country

US

4. FEI Number

04-2921972

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LANDS, JOHN S.
 2165 SUNNYDALE BLVD STE M
 CLEARWATER FL 33765

7. Name and Address of New Registered Agent

Name

Lands, John S.

Street Address (P.O. Box Number is Not Acceptable)

2101 Sunnydale Blvd.

Suite C

City

Clearwater

FL

Zip Code

33765

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
 NAME LANDS, JOHN S.
 STREET ADDRESS 2142 ANDREWS CT.
 CITY-ST-ZIP DUNEDIN FL 34698 ☐ Delete

TITLE D
 NAME LANDS, LYDIA H.
 STREET ADDRESS 2142 ANDREW COURT
 CITY-ST-ZIP DUNEDIN FL 34698 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John S. Lands - John S. Lands

1/12/01

727-441-2534

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)