FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K14064

1. Corporation Name

ORION DEVELOPMENT INC,

Principal Place of Business | Mailing Address

REINSTATEMENT 98-99
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
FEBRUARY 5, 1988

2. Principal Place of Business
21 730 PINELLAS BAYWAY
Suite, Apt. #, etc.
22
City & State
23 TIERRA VERDE FL
Zip 24 33715 Country 25 USA

2a. Mailing Address
26 P.O. BOX 66407
Suite, Apt. #, etc.
27
City & State
28 ST. PETE BEACH FL
Zip 29 33736 Country 30 USA

4. FEI Number
375-32-5511
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SCHELL, ARTHUR L
730 PINELLAS BAYWAY
TIERRA VERDE, FL. 33715

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Arthur L. Schell Pres. Arthur L Schell 8-14-99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SECT-TREAS	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SCHELL, F.J.		1.2 NAME	900002975179--0
STREET ADDRESS	730 PINELLAS BAYWAY		1.3 STREET ADDRESS	-08/31/99--01069--012
CITY-ST-ZIP	TIERRA VERDE, FL. 33715		1.4 CITY-ST-ZIP	****900.00 ****900.00
TITLE	PRES,	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SCHELL, ARTHUR L.		2.2 NAME	
STREET ADDRESS	730 PINELLAS BAYWAY		2.3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VERDE, FL 33715		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	TB 8-8-99
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Arthur L Schell 8-3-99 727-867-4445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
ARTHUR L. SCHELL