

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084590

FILED  
Apr 25, 2005  
Secretary of State

Entity Name: ORBITAL ENTERPRISES, LLC

**Current Principal Place of Business:**

19225 GUNN HWY  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

19225 GUNN HWY  
ODESSA, FL 33556

**New Mailing Address:**

FEI Number: 27-0110087

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GONCALVES, AUGUST  
19225 GUNN HWY  
ODESSA, FL 33556 US

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

GONCALVES, AUGUST  
19225 GUNN HWY  
ODESSA, FL 33556 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: AUGUST GONCALVES

04/25/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: GONCALVES, AUGUST  
Address: 19225 GUNN HWY  
City-St-Zip: ODESSA, FL 33556

Title: MGR (X) Delete  
Name: VANDORSTEW, EVAN  
Address: 19311 GUNN HWY  
City-St-Zip: ODESSA, FL 33556

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: AUGUST GONCALVES

MGR

04/25/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date