

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000084590

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** ORBITAL ENTERPRISES, LLC

**Current Principal Place of Business:**

17305 SHERMAN RD  
LUTZ, FL 33558

**New Principal Place of Business:**

3710 NORTH 40TH STREET  
TAMPA, FL 33610

**Current Mailing Address:**

PO BOX 849  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 27-0110087

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONCALVES, AUGUST  
17305 SHERMAN RD  
LUTZ, FL 33558 US

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

GONCALVES, AUGUST  
3710 NORTH 40TH STREET  
TAMPA, FL 33610 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

03/31/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGMR  
Name: GONCALVES, AUGUST  
Address: 3710 NORTH 40TH STREET  
City-St-Zip: TAMPA, FL 33610

I hereby 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

MGMR

03/31/2010

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