


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000080201 1. Entity Name ORION ACQUISITIONS, LLC	
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Principal Place of Business 6 BROADRIVER ROAD ORMOND BEACH, FL 32174	Mailing Address 6 BROADRIVER ROAD ORMOND BEACH, FL 32174
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02182007 No Chg-LLC

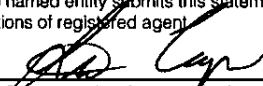
CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent COOPER, STEVEN 6 BROADRIVER ROAD ORMOND BEACH, FL 32174
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IN THIS SPACE**

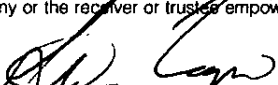
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <u>4/11/07</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

**Filing Fee is \$50.00
Due by May 1, 2007**

000000709161
04/24/07-80144-001 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COOPER, STEVEN 6 BROADRIVER RD ORMOND BEACH, FL 32174
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  Steve Cooper <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	DATE <u>4/11/07</u> 386 672 6511 <small>Date Daytime Phone #</small>