2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 01, 2007 08:00 A **DOCUMENT # L99000000324 Secretary of State** 1. Entity Name ORION FINANCIAL, L.C. Mailing Address Principal Place of Business 732 HIGHWAY 98 EAST 732 HIGHWAY 98 EAST DESTIN, FL 32541 DESTIN, FL 32541 02272007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Numbe Applied For 63-1242330 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TARKOE, CLINTON M DO NOT WRITE 4840 N.E. 28TH AVENUE FT. LAUDERDALE, FL 33308 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 egent. SIGNA tered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE FOSTER, CLIFFORD III NAME STREET ADDRESS 732 HIGHWAY 98 EAST CITY-ST-ZIP DESTIN, FL 32541 TITLE NAME U00000652335 03/12/07-80014-011 50.00 STREET ADDRESS CITY-ST-ZIP TOF NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information is shall have the same legal effect as if made under oath; that I am a managing member or manager of the execute mis-report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the information supplied indicated on this report is true and accurate limited liability company or the acciver outre. with this filing does n and that my signatur SIGNATURE: SIGNATURE AND TYPED OR FISHTED N AGING MEMBER, OR AUTHORIZED REPRESENTATIVE Cate

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