

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000008530

Entity Name: GROUP ORION LLC

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

28991 SETON COURT, SUITE A  
BONITA SPRINGS, FL 34134

## **New Principal Place of Business:**

13799 PARK BLVD. NORTH  
SUITE 169  
SEMINOLE, FL 33776

## **Current Mailing Address:**

28991 SETON COURT, SUITE A  
BONITA SPRINGS, FL 34134

## **New Mailing Address:**

13799 PARK BLVD. NORTH  
SUITE 169  
SEMINOLE, FL 33776

FEI Number: 65-0967425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARRELL, THOMAS J  
28991 SETON COURT, SUITE A  
BONITA SPRINGS, FL 34134 US

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

HARRELL, THOMAS J  
13799 PARK BLVD. NORTH  
SUITE 169  
SEMINOLE, FL 33776 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:

03/25/2010

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HARRELL, THOMAS J  
Address: 13799 PARK BLVD. NORTH, SUITE 169  
City-St-Zip: SEMINOLE, FL 33776

Title: MGRM  
Name: RAGATZ, J. CLARK  
Address: 13799 PARK BLVD. NORTH, SUITE 169  
City-St-Zip: SEMINOLE, FL 33776

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: THOMAS J. HARRELL

MGRM

03/25/2010

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