2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# M76783

Entity Name: ORION CONSTRUCTION COMPANY, INC.

Current Principal Place of Business:

3532 SONESTA COURT
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1290
NEW SMYRNA BEACH, FL 32170

New Mailing Address:

FEI Number: 59-2892157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MEHEGAN, THOMAS ROBERT
3532 SONESTA COURT
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MEHEGAN, THOMAS ROBE, RT
Address: 3532 SONESTA COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: OFF. ( ) Delete
Name: MEHEGAN, RITA ANN,
Address: 3532 SONESTA COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: OFF ( ) Delete
Name: MEHEGAN, THOMAS LAWR, ENCE
Address: 1316 COCONUT PALM CIRCLE
City-St-Zip: PORT ORANGE, FL 32128

Title: OFF ( ) Delete
Name: MEHEGAN, CHRISTOPHER, ROBERT
Address: 112 PEPPERWOOD
City-St-Zip: DAYTONA BEACH, FL 32119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RITA A. MEHEGAN OFF 01/22/2009

Electronic Signature of Signing Officer or Director — Date