2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000020201

Entity Name: ORION ONE DEVELOPMENT, INC.

FILED Apr 18, 2007 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

350 E LAS OLAS BLVD 350 EAST LAS OLAS BLVD.

SUITE 1250 SUITE 1250

FT. LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 US

Current Mailing Address: New Mailing Address:

350 E LAS OLAS BLVD 350 EAST LAS OLAS BLVD.

SUITE 1250 SUITE 1250

FT. LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 US

FEI Number: 20-2332518 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BISCHOFF, DOUGLAS K AMERICAN INFORMATION SERVICES, INC.

350 E LAS OLAS BLVD 350 EAST LAS OLAS BLVD

SUITE 1250 SUITE 1600

FT. LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 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: DIANA M. GUERRA, ASSISTANT SECRETARY 04/18/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

350 E LAS OLAS BLVD SUITE 1250

FT. LAUDERDALE, FL 33301 US

OFFICERS AND DIRECTORS:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D () Delete Title: PSTD (X) Change () Addition

Name: DAY, JAMES R Name: DAY, JAMES R

Address: 350 E LAS OLAS BLVD SUITE 1250 Address: 350 EAST LAS OLAS BLVD., SUITE 1250 City-St-Zip: FT. LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 US

Name: BISCHOFF, DOUGLAS K Name: FONTAINE, RAYMOND E

Address: 350 E LAS OLAS BLVD SUITE 1250 Address: 350 EAST LAS OLAS BLVD., SUITE 1250 City-St-Zip: FT. LAUDERDALE, FL 33301 US City-St-Zip: FORT LAUDERDALE, FL 33301 US

Name: BLOOM, PHILIP D Name: ASHLEY, GUY

Address: 350 E LAS OLAS BLVD SUITE 1250 Address: 350 EAST LAS OLAS BLVD., SUITE 1250 City-St-Zip: FT. LAUDERDALE, FL 33301 US City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: D (X) Delete Title: () Change () Addition Name: FONTAINE, RAYMOND E Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES R. DAY P 04/18/2007