2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050768

Entity Name: THE ORION GROUP INC.

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9572 LAKE CHASE ISLAND WAY 9127 SW 52ND AVENUE TAMPA, FL 33626

SUITE D202

GAINESVILLE, FL 32608

Current Mailing Address: New Mailing Address:

PO BOX 262974 9127 SW 52ND AVENUE TAMPA, FL 33685 SUITE D202

GAINESVILLE, FL 32608

FEI Number: 20-2625000 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:

JONES, BARRY R JONES, BARRY R 9572 LÁKE CHASE ISLAND WAY 9127 SW 52ND AVENUE TAMPA, FL 33626 SUITE D202

GAINESVILLE, FL 32608 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: BARRY R JONES 04/29/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JONES, BARRY R JONES, BARRY R Name: Name: Address:

9127 SW 52ND AVENUE SUITE D202 9572 LAKE CHASE ISLAND WAY Address:

City-St-Zip: TAMPA, FL 33626 City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: BARRY R JONES 04/29/2006 DIR

Electronic Signature of Signing Officer or Director

Date