

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17438

FILED
Jan 08, 2010
Secretary of State

Entity Name: ORIX FINANCIAL SERVICES, INC.

Current Principal Place of Business:

1717 MAIN STREET
SUITE 900
DALLAS, TX 75201 US

New Principal Place of Business:

Current Mailing Address:

1717 MAIN STREET
SUITE 900
DALLAS, TX 75201 US

New Mailing Address:

FEI Number: 13-2507476 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.
SUITE 508
MIAMI, FL 331560000 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: S
Name: DAANE, ELIZABETH
Address: 1717 MAINST STE 900
City-St-Zip: DALLAS, TX 75201

Title: CFO
Name: COUSINS, MIKE E
Address: 1717 MAIN ST STE 700
City-St-Zip: DALLAS, TX 75201

Title: D
Name: COUSINS, MICHAEL E
Address: 1717 MAIN STREET, SUITE 900
City-St-Zip: DALLAS, TX 75201

Title: D
Name: NISHITANI, HIDETO
Address: 600 TOWN PARK LANE STE 300
City-St-Zip: KENNESAW, GA 30144

Title: VP
Name: STEPHENS, KANDICE
Address: 1717 MAIN STREET, SUITE 900
City-St-Zip: DALLAS, TX 75201

Title: VP
Name: KALPAKOFF, YVONNE
Address: 600 TOWN PARK BLVD, 3RD FLOOR
City-St-Zip: KENNESAW, GA 30144

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH DAANE

S

01/08/2010

Electronic Signature of Signing Officer or Director

_____ Date