


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P95000060625**

1. Entity Name  
**ORNDA FMC, INC.**



**FILED**  
06 MAR 17 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business <b>13737 NOEL ROAD STE 100 DALLAS, TX 75240</b>	Mailing Address <b>13737 NOEL ROAD STE 100 DALLAS, TX 75240</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02212006 Chg-P CR2E034 (11/05) *06*

4. FEI Number <b>65-0638327</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
1200 SO. PINE ISLAND ROAD  
PLANTATION, FL 33324**

**7. Name and Address of New Registered Agent**

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_

City **FL** Zip Code \_\_\_\_\_

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P STEIGMAN, DONALD S 500 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	<input type="checkbox"/> Delete
TITLE	SD LARSEN, CAITLIN M 3820 STATE STREET SANTA BARBARA, CA 93105	<input type="checkbox"/> Delete
TITLE	AS MACK, KRISTIN A 3820 STATE STREET SANTA BARBARA, CA 93105	<input type="checkbox"/> Delete
TITLE	T DENT, DENNIS L 3820 STATE STREET SANTA BARBARA, CA 93105	<input type="checkbox"/> Delete
TITLE		<input type="checkbox"/> Delete
TITLE		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	P Steigman, Donalds S 13737 Noel Rd Ste 100 Dallas TX 75240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	SD Larsen, Caitlin 13737 Noel Rd Ste 100 Dallas TX 75240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	AS Mack, Kristina A. 13737 Noel Rd Ste 100 Dallas TX 75240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	T Sherman, Jeffrey S. 13737 Noel Rd Ste 100 Dallas TX 75240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Caitlin Larsen* Caitlin Larsen 2/24/06 469-893-2701  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

**WILLIAMS** MAR 17 2006