2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State
05-05-2008 90256 017 ***150.00

DOCUMENT # P99000003337

1. Entity Name
ORION PROPERTIES, INC.

Principal Place of Business	Mailing Address
16238 COASTAL PLAIN DR. SRPINGHILL, FL 34610	16238 COASTAL PLAIN DR. SRPINGHILL, FL 34610

DO NOT WRITE IN THIS SPACE

04182008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3558908
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DURSCHLAG, CARA R
16238 COASTAL PLAIN DR.
SRPINGHILL, FL 34610

DO NOT WRITE IN THIS SPACE

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, 2008 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KLINE, DARLENE B
STREET ADDRESS	18550 WELLBORN LANE
CITY-ST-ZIP	SPRINGHILL, FL 34610
TITLE	D
NAME	DURSCHLAG, CARA R
STREET ADDRESS	16238 COASTAL PLAIN DR.
CITY-ST-ZIP	SRPINGHILL, FL 34610
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: CARA DURSCHLAG 4/29/08 727-856-7729
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #