

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000002308

**Entity Name:** ORRA SGS, INC.

**Current Principal Place of Business:**

1330 WEST LEE ROAD  
ORLANDO, FL 32810

**Current Mailing Address:**

1330 LEE ROAD  
ORLANDO, FL 32810 US

**FEI Number:** 01-0667954

**Certificate of Status Desired:** No

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

A.G.C. CO.  
200 SOUTH ORANGE AVENUE  
2300 SUN BANK CENTER  
ORLANDO, FL 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title SD  
Name STANLY, JACQUELYN SEC'Y  
Address 1330 LEE ROAD  
City-State-Zip: ORLANDO FL 32810

Title D  
Name BAINTER, PAT DIRECTO  
Address 6211 N.W. 132ND STREET  
City-State-Zip: GAINESVILLE FL 32653

Title D  
Name SIEGEL, SARA DIRECTO  
Address 201 N. NEW YORK AVENUE - SUITE  
100  
City-State-Zip: WINTER PARK FL 32789

Title TREASURER  
Name FRYER, RICHARD TREASUR  
Address 5029 EDGEWATER DRIVE  
City-State-Zip: ORLANDO FL 32810

Title CHAIRMAN  
Name ROKEH, GREGORY CH  
Address 1445 W STATE 434  
City-State-Zip: LONGWOOD FL 32750

Title DIRECTOR  
Name VOSS, SHARON  
Address 317 WEKIVA SPRINGS RD  
City-State-Zip: LONGWOOD FL 32779

*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:** JACQUELYN STANLY

SECTY

01/30/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date