## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026918

Entity Name: ORION ALLIANCE, LLC

**Current Principal Place of Business:** 

2447 BRIAR CREEK DRIVE APOPKA, FL 32703

**Current Mailing Address:** 

2447 BRIAR CREEK DRIVE APOPKA, FL 32703

FEI Number: 20-0979505 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILCOX, KAREN L 2447 BRIAR CREEK DRIVE APOPKA, FL 32703 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.

Title

MGR

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Sep 10, 2015

**Secretary of State** 

CC4561358723

Authorized Person(s) Detail:

Title MGRM

Name WILCOX, KAREN L Name SALADINO, JOSEPH A

Address 2447 BRIAR CREEK DRIVE Address 16142 EAGLE WATCH DRIVE

City-State-Zip: APOPKA FL 32703 City-State-Zip: TAVARES FL 32778

Title MGR

Name KIERSTEAD, BONNIE

Address 16142 EAGLE WATCH DRIVE

City-State-Zip: TAVARES FL 32778

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN L. WILCOX

Electronic Signature of Signing Authorized Person(s) Detail

**MGRM** 

09/10/2015

Date