


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # F01000001104 1. Entity Name AMERICAN DISH SERVICE, INC.	
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Principal Place of Business 900 BLAKE ST KANSAS CITY, KS 66111	Mailing Address 900 BLAKE ST. EDWARDSVILLE, KS 66111-3820
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DO NOT WRITE IN THIS SPACE



01032008 No Chg-P CR2E034 (11/05)

4. FEI Number 43-1031331	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent KAVANAUGH, JOEL R 3060 SANTEE PLACE JACKSONVILLE, FL 32259

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDREWS, JAMES T 3033 W 167TH ST STILWELL, KS 66085
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORSE, CHRIS 27560 W. 120TH PLACE OLATHE, KS 66061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COX JR, ROBERT A PO BOX 500 RICHMOND, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ANDREWS, WILSON P 9810 ST JULIANS LANE RICHMOND, VA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDREWS, SHERRY T 9810 ST JULIANS LANE RICHMOND, VA 23233
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000774952
 01/08/08-80011-009 150.00

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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  James T. Andrews 01/03/08 913-422-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #