

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005604

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** SATELLITE USERS INTERFERENCE REDUCTION GROUP CORPORATION

**Current Principal Place of Business:**

1430 WREN COURT  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 512548  
PUNTA GORDA, FL 339512548 US

**New Mailing Address:**

**FEI Number:** 20-0247769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

AMES, ROBERT W PRESIDE  
1430 WREN COURT  
PUNTA GORDA, FL 33950 US

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

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

**OFFICERS AND DIRECTORS:**

Title: MR ( ) Delete  
Name: BUDDEN, JAMES CHAIR  
Address: P. O. BOX 32  
City-St-Zip: TWO ROCKS, WA 6037 AU

Title: MR ( ) Delete  
Name: EDWARDS, ADAM TRESURE  
Address: 2323 GRIMVILLE ROAD  
City-St-Zip: MT. AIRY, MD 21771 US

Title: MR ( ) Delete  
Name: SMITH, NIGEL SECRETU  
Address: 223 PILOT KNOB AVE.  
City-St-Zip: MANITOU SPRINGS, CO 80829 US

Title: MR ( ) Delete  
Name: AMES, ROBERT W PRESIDE  
Address: 1430 WREN COURT  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: MS ( ) Delete  
Name: MAIMO, ANGELA DIRECTO  
Address: 3400 INTERNATIONAL DRIVE  
City-St-Zip: WASHINGTON, DC 20008 US

Title: MR ( ) Delete  
Name: HECTOR, FORTIS DIRECTO  
Address: AV. DE LAS TELECOMUNICACIONES  
City-St-Zip: MÉXICO CITY, DF 09310 MX

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT W AMES

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date