

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000000817

1. Entity Name
QUALITY SATELLITE SERVICE, LLC



Principal Place of Business
2572 EMERSON DRIVE
PALM BAY, FL 32909

Mailing Address
PO BOX 100231
PALM BAY, FL 32910-0231



07032007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3694607

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ENLOW, JOHN DENNIS
2572 EMERSON DRIVE
PALM BAY, FL 32909

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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 _____

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
ENLOW, JOHN DENNIS
2572 EMERSON DR
PALM BAY, FL 32909

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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U00000767250
07/06/07-80006-017 50.00

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IN THIS SPACE**

11. 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 is true and accurate and that my 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 606, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

John Dennis Enlow 7-3-07 321-984-8211