

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043824

Entity Name: ALLIANCE SATCOM LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8840 HWY 78 W.  
OKEECHOBEE, FL 32974

**New Principal Place of Business:**

**Current Mailing Address:**

8840 HWY 78 W.  
OKEECHOBEE, FL 32974

**New Mailing Address:**

FEI Number: 58-2678126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ST LAURENT, SUZANNE  
8840 HWY 78 W.  
OKEECHOBEE, FL 32974 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ST-LAURENT, LOUIS  
Address: 8840 HWY 78W  
City-St-Zip: OKEECHOBEE, FL 34974

Title: MGRM  
Name: ST-LAURENT, MICHAEL  
Address: 8840 HWY 78W  
City-St-Zip: OKEECHOBEE, FL 34974

Title: MGRM  
Name: ST-LAURENT, SUZANNE  
Address: 8840 HWY 78W  
City-St-Zip: OKEECHOBEE, FL 34974

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SUZANNE ST-LAURENT

MGRM

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date