


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 10, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L04000035207 |  |
| 1. Entity Name KVH ENTERPRISES, LLC | |

| | |
|--|--|
| Principal Place of Business 3635 PRADO DRIVE SARASOTA FL 34235 | Mailing Address 3635 PRADO DRIVE SARASOTA FL 34235 |
|--|--|



| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

1st MOORE CR2E083 (10/05)
4. FEI Number **NO-T APPLICABLE** Applied For ☐ Not Applicable ☒

| | | | |
|---|--|--|--|
| 6. Name and Address of Current Registered Agent HELMUTH, KEITH V 3635 PRADO DRIVE SARASOTA FL 34235 | | 7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____ | |
|---|--|--|--|

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.

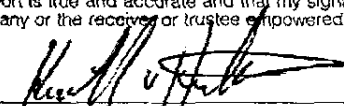
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstated) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

000000498986
04/24/06-80011-019 50.00

| 9. MANAGING MEMBERS/MANAGERS | | | | 10. ADDITIONS/CHANGES | | | |
|--|--|---------------------------------|--|--|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR HELMUTH, KEITH V 3635 PRADO DRIVE SARASOTA FL 34235 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 608, Florida Statutes.

SIGNATURE:  4-1-06 941-313-1375