# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 23, 2007**
**Secretary of State**

DOCUMENT# M06000000029

**Entity Name:** ETV FINANCE COMPANY, LLC

**Current Principal Place of Business:**

8 WASHINGTON ROAD
ATKINSON, NH 03811

**New Principal Place of Business:**

**Current Mailing Address:**

8 WASHINGTON ROAD
ATKINSON, NH 03811

**New Mailing Address:**

**FEI Number: 20-3955984** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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 | ( ) Delete |
| Name: | KILEY, MARK P | |
| Address: | 70 FRANKLIN STREET | |
| City-St-Zip: | BOSTON, MA 02110 | |
| Title: | MGRM | ( ) Delete |
| Name: | DUGAN, DONALD R JR. | |
| Address: | 42 FALLVIEW DIRVE | |
| City-St-Zip: | GLASTONBURY, CT 06033 | |
| Title: | MGRM | ( ) Delete |
| Name: | BROUGH, DOUGLAS | |
| Address: | 136 BAY DRIVE | |
| City-St-Zip: | STEVENSVILLE, MD 21666 | |
| Title: | MGRM | ( ) Delete |
| Name: | O'BRIEN, PAUL | |
| Address: | 451 WELLESLEY STREET | |
| City-St-Zip: | WESTON, MA 02493 | |
| Title: | MGRM | ( ) Delete |
| Name: | WATTS, J. ALEX | |
| Address: | 1616 CONCORDIA DRIVE | |
| City-St-Zip: | PASADENA, MD 21122 | |

**ADDITIONS/CHANGES:**

| | |
|---|---|
| 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 for the exemption stated in Chapter 119, Florida Statutes. I further 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: MARK P KILEY MGRM 03/23/2007

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