PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	P291	23
1 0		1 201	

Principal Place of Business	Mailing Address
161 INVERNESS DRIVE WEST	PO BOX 6742
ENGLEWOOD CO 80112	ENGELWOOD CO 80155-6742
S	US

FILED Mar 10, 1999 8:00 am Secretary of State 03-10-1999 90047 021 ***150.00

i Corporation	VIEN 1 # P29123 SAT COMMUNICATIONS NE	TWORK, INC.	ě		
Principal Place	of Business	Mailing Address		L MBINSB) tiğ state iğibi tibsa masa ssu a	TEff Bibit Bidit Atfil Effit aver saei.
161 INVERNESS ENGLEWOOD C		PO BOX 6742 ENGELWOOD CO 80155-6742		DO NOT WRITE IN	THIS SPACE
S		US		Date Incorporated or Qualified	
				04/30/1990	
2 Oringinal Bi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
-	•	(Same)		65-0190513	Not Applicable
Suite, Apt.	est Indianatown Rd. #. etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 Ste. 1		27		5. Certificate of Status Desires	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Jupite	er, F <u>L</u>	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ar Intangible ————————————————————————————————————
33458	- 125 US	1 0 - 1 - 30)1	Persunal Property Tax. 10. Name and Address of New Registre	
	9. Name and Address of Gurren		81 Name	curien	~
CT	CORPORATION SYSTEM	K-1	1) Co	rporation Service Company	
	WEST BROWARD BLVD.			Address (P.O. Box Number is Not Acceptable) 01 Hays Street	
	ITATION FL 33324		83	or mays burcee	
, , ,	17.10.11.12.0002.1		L. J	·	
•			84 City	llahassee	FL 35 Zip Code 32301
44 Bussiant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes.	the above-named	corporation submits this statement for the purpor	se of changing its registered
office or re agent. I as	egistered agent, or both, in the State of familiar with, and accept the obligation of the control of the contro	of Florida. Such change was auth tions of, Section 607.0505, Florida	norized by the corporate Statutes.	corporation submits this statement for the purpor pration's board of directors. I hereby accept the a	appointment as registered
SIGNATURE	(Change of Registe: Signature, typed or printed name of registered agent	red Agent Filled (NOTE: Re	egistered Agent eignature n	equired when reinstating) DAT	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	Change ☑ Additio
TITLE	DP	M DETELE	1.1 TITLE	D/P	Charle Marce
NAME	FALK, DOUGLAS I		1.2 NAME	F. Derek Woods	500
STREET ADDRESS	8400 NW 52ND ST, SUITE 110		13 STREET ADDRESS	6903 Rockledge Dr., Ste.	
CITY-ST-ZIP	MIAMI FL 33166	7 DELETE	14 CITY-ST-ZIP	West Bethesda, MD 20817	Change Additio
TITLE	VPD	(2) OFFE IF	2.1 TTLE	George E. Kilguss	
NAME	GRENFELL, JAMES D		2.2 NAME	6903 Rockledge Dr. Ste.	500
STREET ADDRESS	161 INVERNESS DR W		2.3 STREET ADDRESS	West Bethesda, MD 20817	
CITY-ST-ZIP	ENGLEWOOD CO 80112	(X) DELETE	2.4 C/TY-ST-ZIP 3.1 TITLE	D/S/T	☐ Change 🔀 Additio
TITLE	DV	#3 OCT.15	3.2 NAME	Neil Phillips	
NAME CYDOTT LODGESS	Maassen, Marc e 161 Inverness Dr W		3.3 STREET ADDRESS	6903 Rockledge Br., Ste.	500
STREET ADDRESS	ENGALWOOD CO 80112		3.4. C/TY-ST-ZIP	West Bethesda, MD 20817	·
CRTY-ST-ZIP	-VPS	DELETE	4.1 TITLE	D	☐ Change Addition
NAME	TEAGUE, DON		4.2 NAME	Derrick R. Rowe	
STREET ADDRESS) · = · · · · · · · · · · · · · · · · ·		4.3 STREET ADDRESS	6903 Rockledge Dr. Ste.	500
CITY-ST-ZIP	ENGLEWOOD CO 80112		44 CITY-ST-ZIP	West Bethesda, MD 20817	
TITLE	T	DELETE	5.1 TITLE		☐ Change ☐ Additio
NAME	VEGLIANTE, REGINA A		5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	ENGLEWOOD CO 80112		5.4 CITY-ST-ZIP		
TITLE	VP.		6.1 TITLE		Change Addition
NAME	HALSEY, GREG		6.2 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		
1			64 CITY-ST-782	· ·	

CITY-ST-ZP ENGLEWOOD CO 80112

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

03-01-99

Florida Department of State, Sandra B. Mortham, Secretary of State

*** FILING FEE: \$35.00 ***

54211990326 37

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of DELAWARE submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation is: MARINESAT COMMUNICATIONS NETWORK, INC
2. The mailing address of the corporation is: P.O. BOX 6742
ENGELWOOD, CO 80155-6742
3. Date of incorporation/qualification: 4/30/90 Document number:
4. The name and address of the current registered agent and office:
25. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
Noven 9 Selection 12-10-48
(Signature of an officer) chairman or vice chairman of the board) (Date)
GEORGE E. KILGUSS, VICE PRESIDENT 12-10-98
(Printed or typed name and title) (Date)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
Corporation Service Company [2-17-98]
(Signature of Registered Agent) (Date)
If signing on behalf of an entity: Karen B. Rozar. Asst. Sec. Corporation Service Company
(Typed or Printed Name) (Capacity)

CR2E045(3/96)