

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P31253** (8)
1. Corporation Name
SATELLITE CABLE SERVICES, INC.



Principal Place of Business 513 S. MAIN AVENUE P.O. BOX 1030 SIOUX FALLS SD 57101-1030	Mailing Address 513 S. MAIN AVENUE P.O. BOX 1030 SIOUX FALLS SD 57101-1030
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2. Principal Place of Business 21 100 North Phillips Avenue Suite, Apt. #, etc. 22 Suite 901 City & State 23 Sioux Falls, SD Zip 24 57104		2a. Mailing Address 26 100 North Phillips Avenue Suite, Apt. #, etc. 27 Suite 901 City & State 28 Sioux Falls, SD Zip 29 57104 Country 30 USA		3. Date Incorporated or Qualified 10/05/1990	3a. Date of Last Report 03/19/1996
				4. FEI Number 46-0355993	Applied For ☐ Not Applicable
				5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

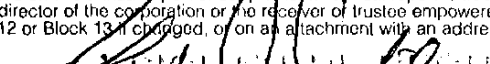
9. Name and Address of Current Registered Agent DALTON, STEPHEN E. 1833 HENDRY STREET P.O. DRAWER 1507 FT. MYERS FL 33902		10. Name and Address of New Registered Agent 81 Name John Streeter 82 Street Address (P.O. Box Number is Not Acceptable) 5120 Stringfellow Road 83 84 City St. James City FL 85 Zip Code 33956	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  **John Streeter** DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	☐ DELETE	1.1 TITLE President/Director	☐ Change ☒ Addition
NAME ABBOTT, J W		1.2 NAME Richard A. Cutler	
STREET ADDRESS 1105 WALNUT		1.3 STREET ADDRESS 1005 Ralph Rogers Road	
CITY-ST-ZIP YANKTON SD		1.4 CITY-ST-ZIP Sioux Falls, SD 57108	
TITLE VD	☐ DELETE	2.1 TITLE Director	☐ Change ☒ Addition
NAME KNUDSON, DAVID L.		2.2 NAME David Bozied	
STREET ADDRESS 2100 SLATEN COURT		2.3 STREET ADDRESS 676 Park Avenue	
CITY-ST-ZIP SIOUX FALLS SD		2.4 CITY-ST-ZIP Brookings, SD 57006	
TITLE V	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME BIERSCHBACH, DOUGLAS M.		3.2 NAME	
STREET ADDRESS 805 2ND ST., SW		3.3 STREET ADDRESS	
CITY-ST-ZIP DESMET SD		3.4 CITY-ST-ZIP	
TITLE V	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME JOHNSON, J. ALAN		4.2 NAME	
STREET ADDRESS P.O. BOX 295		4.3 STREET ADDRESS	
CITY-ST-ZIP HILL CITY SD		4.4 CITY-ST-ZIP	
TITLE STD	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME HAYES, ROBERT E.		5.2 NAME	
STREET ADDRESS 1303 S. MAIN AVENUE		5.3 STREET ADDRESS	
CITY-ST-ZIP SIOUX FALLS SD		5.4 CITY-ST-ZIP	
TITLE D	☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME SMITH, DEMING		6.2 NAME	
STREET ADDRESS 1510 S. PHILLIPS AVENUE		6.3 STREET ADDRESS	
CITY-ST-ZIP SIOUX FALLS SD		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:  **Richard A. Cutler** 4/9/97 (605) 335-4950

CR2E034 (9/96)