

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P31253

1. Entity Name

SATELLITE CABLE SERVICES, INC.

**FILED**  
**Jun 29, 2000 8:00 am**  
**Secretary of State**

06-29-2000 90653 010 \*\*\*550.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

100 N PHILLIPS AVE  
STE 901  
SIOUX FALLS SD 57104

100 N PHILLIPS AVE  
STE 901  
SIOUX FALLS SD 57104-6725  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

46-0355993

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STREETER, JOHN  
5120 STRINGFELLOW RD  
P.O. DRAWER 1507  
ST JAMES CITY FL 33956

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax-filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME ABBOTT, J.W.  
STREET ADDRESS 415 E MAIN ST  
CITY-ST-ZIP VERMILLION SD 57069

TITLE D ☐ Change ☒ Addition  
NAME Bozied, David  
STREET ADDRESS 676 Park Avenue  
CITY-ST-ZIP Brookings, SD 57006

TITLE VD ☐ Delete  
NAME KNUDSON, DAVID L.  
STREET ADDRESS 2100 SLATEN COURT  
CITY-ST-ZIP SIOUX FALLS SD

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME BIRSCHBACH, DOUGLAS M.  
STREET ADDRESS 805 2ND ST., SW  
CITY-ST-ZIP DESMET SD

TITLE V ☒ Change ☐ Addition  
NAME Bierschbach, Douglas M.  
STREET ADDRESS 216 16th Avenue  
CITY-ST-ZIP Brookings, SD 57006

TITLE V ☐ Delete  
NAME JOHNSON, J. ALAN  
STREET ADDRESS P O BOX 295 N/A  
CITY-ST-ZIP HILL CITY SD

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE STD ☐ Delete  
NAME HAYES, ROBERT E.  
STREET ADDRESS 1303 S. MAIN AVENUE  
CITY-ST-ZIP SIOUX FALLS SD

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME CUTLER, RICHARD A  
STREET ADDRESS 1005 RALPH ROGERS RD  
CITY-ST-ZIP SIOUX FALLS SD

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A. Cutler 1/12/2000 605-335-4950

Date

Daytime Phone #

CF 11 134 (3/95)