

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000032136

FILED
May 21, 2008
Secretary of State

Entity Name: SATELLITE BROADCASTING CORPORATION

Current Principal Place of Business:

1330 GALLEON DR
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 1712
RICHMOND, IN 473751712 US

New Mailing Address:

FEI Number: 65-0698746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOGEL, JAMES D
3936 TAMIAMI TRAIL NORTH
SUITE B
NAPLES, FL 34103 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CARLSON, GARRETT G SR.
Address: 1330 GALLEON DR
City-St-Zip: NAPLES, FL

Title: V () Delete
Name: SCHELL, LYNN C
Address: 900 2ND AVENUE SOUTH STE 880
City-St-Zip: MINNEAPOLIS, MN 55402

Title: ST () Delete
Name: VOGEL, JAMES D ESQ.
Address: 3936 TAMIAMI TRAIL NO STE B
City-St-Zip: NAPLES, FL 33940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN MOORE

Electronic Signature of Signing Officer or Director

MEMB

05/21/2008

Date