

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000092056

**Entity Name:** EXCEL CABLE SERVICES LLC

**Current Principal Place of Business:**

2 MILL ST  
WELAKA, FL 32193

**Current Mailing Address:**

PO BOX 415  
WELAKA, FL 32193 US

**FEI Number: 80-0483158**

**Certificate of Status Desired:** No

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

SANDS, GORDON LJR  
2 MILL STREET  
WELAKA, FL 32193 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name SANDS, GORDON LJR  
Address 2 MILL STREET  
City-State-Zip: WELAKA FL 32193

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: GORDON L SANDS**

**MGR**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date