

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002091

FILED
Apr 23, 2008
Secretary of State

Entity Name: VANTAGE POINT, LLC

Current Principal Place of Business:

1655 IXORA AVE.
NAPLES, FL 341025133

New Principal Place of Business:

Current Mailing Address:

225 S. HURSTBOURNE PKWY
SUITE 103
LOUISVILLE, KY 40222

New Mailing Address:

FEI Number: 35-2071956 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKETER, ALLEN
1655 IXORA AVE.
NAPLES, FL 341025133 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BLACKETER, ALLEN
Address: 1655 IXORA AVE.
City-St-Zip: NAPLES, FL 341025133

Title: MGR () Delete
Name: BLACKETER, ASHLEY
Address: 225 S.HURSTBOURNE PKWY STE. 103
City-St-Zip: LOUISVILLE, KY 40222

Title: MGR () Delete
Name: BLACKETER, KEN
Address: 225 S.HURSTBOURNE PKWY STE. 103
City-St-Zip: LOUISVILLE, KY 40222

ADDITIONS/CHANGES:

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 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 608, Florida Statutes.

SIGNATURE: ALLEN BLACKETER

MEMB

04/23/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date