

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000004441

**FILED**  
**Mar 25, 2020**  
**Secretary of State**  
**2284000806CC**

**Entity Name:** VANTAGE ARCHITECTS, L.L.C.

**Current Principal Place of Business:**

4900 BOWLING STREET SW  
CEDAR RAPIDS, IA 52404

**Current Mailing Address:**

4900 BOWLING STREET SW  
CEDAR RAPIDS, IA 52404 US

**FEI Number:** 42-1498080

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 MBR  
Name SCHMIDT JR, KERMIT  
Address 4900 BOWLING STREET SW  
City-State-Zip: CEDAR RAPIDS IA 52404

Title MBR  
Name PILCHER, KENT  
Address 131 W 2ND STREET  
City-State-Zip: DAVENPORT IA 52801

Title AP  
Name CROWDER, KARL J  
Address 131 W 2ND STREET  
City-State-Zip: DAVENPORT IA 52801

Title MBR  
Name DANNER, RON S  
Address 131 W 2ND STREET  
City-State-Zip: DAVENPORT IA 52801

Title AP  
Name KIBLER, JEFFREY C  
Address 131 W. 2ND STREET  
City-State-Zip: DAVENPORT IA 52801

*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:** KENT PILCHER

**MEMBER**

**03/25/2020**

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

\_\_\_\_\_  
Date