

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000002562

Entity Name: VANTAGE POINT SOLUTIONS INC**Current Principal Place of Business:**2211 N MINNESOTA ST
MITCHELL, SD 57301**Current Mailing Address:**2211 N MINNESOTA ST
MITCHELL, SD 57301**FEI Number:** 22-3860061**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUBCO REGISTERED AGENT SERVICES INC
155 OFFICE PLAZA DR. 1ST FL
TALLAHASSEE, FL 32301 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**Officer/Director Detail :**

Title	CHAIRMAN
Name	THOMPSON, LARRY
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

Title	DIRECTOR
Name	GLANZER, CHAD
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

Title	SECRETARY
Name	STAHLE, NICOLE
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

Title	TREASURER
Name	STAHLE, NICOLE
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

Title	DIRECTOR
Name	WEBER, NATHAN
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

Title	DIRECTOR
Name	SAPP, TODD
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

Title	DIRECTOR
Name	DARRINGTON, JULIE
Address	2211 N MINNESOTA ST
City-State-Zip:	MITCHELL SD 57301

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 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 all other like empowered.

SIGNATURE: NICOLE STAHLE**CFO****04/15/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date