## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000002959

Entity Name: VTGS, INC.

FILED Feb 05, 2008 Secretary of State

	100, 110	··				
Current Pr	incipal Place o	of Business:	New Principal Place of Business:			
SUITE 300	STSIDE PARKV FTA, GA 30004					
Current Mailing Address:			New Mailing Address:			
SUITE 300	STSIDE PARKV FTA, GA 30004					
FEI Number:	54-1702527	FEI Number Applied For ( )	El Number Not Appli	icable ( ) Certificate of Status Desired ( )		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
2731 EXEC SUITE 4	VICES, INC. CUTIVE PARK D FL 33331 US	DRIVE				
The above in the State		ubmits this statement for the purp	ose of changing it	s registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electronic	Signature of Registered Agent		Date		
Election Can	paign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	COO () E KAPP, MICHAEL 10745 WESTSID ALPHARETTA, G	E PARKWAY	Title: Name: Address: City-St-Zip:	CEO (X) Change ( ) Addition KAPP, MICHAEL D 10745 WESTSIDE PARKWAY ALPHARETTA, GA 30004		
Title: Name: Address: City-St-Zip:	CEO () E SMITH, KENNETI 10745 WESTSID ALPHARETTA, G	E PARKWAY	Title: Name: Address: City-St-Zip:	O (X) Change ( ) Addition GARNER, ALLEN 10745 WESTSIDE PARKWAY ALPHARETTA, GA 30004		
Title: Name: Address: City-St-Zip:	D () E MOODISPAN, LE 10745 WESTSID ALPHARETTA, G	E PARKWAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D ()E ANDERSON, MA' 10745 WESTSID ALPHARETTA, G	E PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () E RYAN, MICHAEL 10745 WESTSID ALPHARETTA, G		Title: Name: Address: City-St-Zip:	() Change () Addition		

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: ALLEN GARNER O 02/05/2008