


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 13, 2005 08:00 AM
Secretary of State

DOCUMENT # F01000003728 1. Entity Name FLA-ADVANTAGE CAPITAL CORPORATION	
---	---

Principal Place of Business 2300 WINDY RIDGE PARKWAY, SUITE 1100 ATLANTA, GA 30339	Mailing Address 2300 WINDY RIDGE PARKWAY, SUITE 1100 ATLANTA, GA 30339
--	--



04272005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-5659764	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	-----------------------------------

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDP GRUBER, JOSEPH B 2300 WINDY RIDGE PARKWAY, SUITE 1100 ATLANTA, GA 30339
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD ROTHSTEIN, STEVEN 2300 WINDY RIDGE PARKWAY, SUITE 1100 ATLANTA, GA 30339
--	---

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT WILLIAMS, DANIEL O 2300 WINDY RIDGE PARKWAY, SUITE 1100 ATLANTA, GA 30339
--	---

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPS WELLS, THOMAS M 230 WINDY RIDGE PKWY #1100 ATLANTA, GA 30339
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
--	--

1100000366449
05/13/05-80003-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

Daniel O. Williams
VP/Treasurer

5/4/05

Date

Daytime Phone # _____