## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000003728

ATLANTA, GA 30339

City-St-Zip:

Entity Name: FLA-ADVANTAGE CAPITAL CORPORATION

FILED Jan 14, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Princ	ipal Place o	f Business:
	DY RIDGE PAI , GA 30339	RKWAY, SUITE 1100			
Current N	lailing Addres	ss:	New Maili	ng Address:	
	DY RIDGE PAI , GA 30339	RKWAY, SUITE 1100			
FEI Number	: 13-5659764	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )
Name and	l Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:
1201 HAY	ATION SERVIO S STREET SSEE, FL 323				
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,
SIGNATUI	RE:				
	Electror	nic Signature of Registered A	gent		Date
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES	S TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	ROTH, LARRY	Delete IDGE PARKWAY, SUITE 1100 30339	Title: Name: Address: City-St-Zip:	(	) Change ()Addition
Title: Name: Address: City-St-Zip:	ROTHSTEIN, S	IDGE PARKWAY, SUITE 1100	Title: Name: Address: City-St-Zip:	(	) Change ()Addition
Title: Name: Address: City-St-Zip:	WILLIAMS, DA	IDGE PARKWAY, SUITE 1100	Title: Name: Address: City-St-Zip:	(	) Change ()Addition
Title: Name: Address:	WELLS, THOM	) Delete AS M DGE PKWY #1100	Title: Name: Address:	WELLS, THO	X) Change ()Addition MAS M RIDGE PKWY #1100

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.

City-St-Zip:

ATLANTA, GA 30339

SIGNATURE: DANIEL O. WILLIAMS VT 01/14/2009
SIGNATORE, DANIELO, WILLIAMO