2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004111

Entity Name: VIGO LP, INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1300 SAWGRASS CORPORATE PARKWAY SUITE 110 SUNRISE, FL 33323				1301 INTERNATIONAL PARKWAY 4TH FLOOR SUNRISE, FL 33323			
Current Mailing Address:				New Mailing Address:			
12500 EAST BELFORD AVENUE #M21A2 ENGLEWOOD, CO 80112				12500 EAST BELFORD AVENUE CORPORATE GOVERNANCE #M21A2 ENGLEWOOD, CO 80112			
FEI Number:	20-1108038	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desir	red ()
Name and	Address of C	Current Registered Agent:		Name and	Address of I	New Registered Agent:	:
1201 HAYS TALLAHAS	S STREET SSEE, FL 323						
	named entity : e of Florida.	submits this statement for the p	ourpose c	of changing if	ts registered (office or registered agent	t, or both,
SIGNATUF	RE:						
	Electror	nic Signature of Registered Age	ent			Date	
Election Can	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR			
Title: Name: Address: City-St-Zip: Title:	ALICEA-VELEZ 1300 SAWGRA SUNRISE, FL	ASS CORPORATE PARKWAY SUITE	110	Title: Name: Address: City-St-Zip: Title:	ALICEA-VELEZ 1301 INTERNA SUNRISE, FL	TIONAL PARKWAY 4TH FLO	OOR
Name: Address: City-St-Zip:	SCHEIRMAN, S 12500 EAST BI ENGLEWOOD,	ELFORD AVENUE		Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	SCHEIRMAN, S	ELFORD AVENUE		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () KILGORE, SAR 12500 EAST BI ENGLEWOOD,	RAH J ELFORD AVENUE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RODIN, MICHA	ELFORD AVENUE		Title: Name: Address: City-St-Zip:	SCHLAPBACH	ELFORD AVENUE	
Title: Name: Address: City-St-Zip:	KILGORE, SAR	ELFORD AVENUE		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: SARAH J. KILGORE VP 01/04/2008