

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000362

Entity Name: VANTAGE PARTNERS, INC.

FILED
Apr 06, 2008
Secretary of State

Current Principal Place of Business:

102 CHUKKARS DRIVE
THOMASVILLE, GA 31792 US

New Principal Place of Business:

Current Mailing Address:

102 CHUKKARS DRIVE
THOMASVILLE, GA 31792 US

New Mailing Address:

FEI Number: 58-2005692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANDLER, PORTER E
536 FRANK SHAW RD
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

CHANDLER, PORTER E
514 FRANK SHAW RD
TALLAHASSEE, FL 32312 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: PORTER E. CHANDLER

04/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: SINGLETARY, RICHARD L
Address: 102 CHUKKARS DR.
City-St-Zip: THOMASVILLE, GA 31792 US

Title: S () Delete
Name: CHANDLER, PORTER
Address: 536 FRANK SHAW RD
City-St-Zip: TALLAHASSEE, FL 32312 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD L. SINGLETARY, JR.

PT

04/06/2008

Electronic Signature of Signing Officer or Director

Date