

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000045972

FILED
Aug 11, 2005
Secretary of State

Entity Name: VANGUARD COMMERCIAL REALTY, INC.

Current Principal Place of Business:

101 SEABREEZE #105
DAYTONA BEACH, FL 32118 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4235
ORMOND BEACH, FL 32175 US

New Mailing Address:

FEI Number: 59-3194510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELAHUNTY, TERENCE J JR
C/O FOLEY & LARDNER
111 N. ORNAGE AVE., SUITE 1800
ORLANDO, FL 32802 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VANDAGRIFF, SARAH D
Address: POST OFFICE BOX 4235
City-St-Zip: ORMOND BEACH, FL

Title: VP () Delete
Name: DAVIS SR., BENJAMIN R.
Address: 4 WATERFRONT COURT
City-St-Zip: ORMOND BEACH, FL

Title: S () Delete
Name: GOODEARLY, MARY ANN
Address: 1816 TRAVELERS PALM DRIVE
City-St-Zip: EDGEWATER, FL

Title: T () Delete
Name: JONES, ELSE
Address: 600 SEABREEZE BLVD, STE 105
City-St-Zip: DAYTONA BEACH, FL

Title: VP () Delete
Name: WHIDDON, MARGARET D
Address: P. O. BOX 204
City-St-Zip: TALLAHASSEE, FL 32302 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: VANDAGRIFF, SARAH D
Address: P. O. BOX 4235
City-St-Zip: ORMOND BEACH, FL 32175 US

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 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 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 D. VANDAGRIFF

P

08/11/2005

Electronic Signature of Signing Officer or Director

Date