

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90171 026 ****61.25

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DOCUMENT # 742167

1. Entity Name

VOYAGER CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

2900 N.E. 14TH ST. CAUSEWAY
POMPANO BEACH FL 33062

Mailing Address

2900 N.E. 14TH ST. CAUSEWAY
POMPANO BEACH FL 33062

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2067262**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

COUGHLIN, ANN
UNIT 707
2900 NE 14TH STREET
POMPANO BCH FL 33062

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Ann Coughlin

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	COUGHLIN, ANN	UNIT 707, 2900 NE 14TH ST.	POMPANO BEACH FL 33062	<input type="checkbox"/>
SD	REBELLO, JOHN	2900 NE 14TH ST. UNIT 509	POMPANO BCH FL 33062	<input checked="" type="checkbox"/>
TD	SHERMAN, FERNE	UNIT 505, 2900 NE 14TH ST.	POMPANO BEACH FL 33062	<input type="checkbox"/>
1V	CORNEY, COLLEEN	UNIT 104, 2900 NE 14TH ST.	POMPANO BCH FL 33062	<input checked="" type="checkbox"/>
2V	SENMIJ, LORRAINE	UNIT 402 2900 NE 14TH ST.	POMPANO BEACH FL 33062	<input checked="" type="checkbox"/>
SD	Meredith Douglas	2900 NE 14th St, Unit 802	Pompano Beach, FL 33062	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
IV	Charlotte Engleman	2900 NE 14th St., Unit 906	Pompano Beach, FL 33062	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2V	EILEEN CUNNIFF	2900 NE 14th St, #1009	Pompano Beach, FL 33062	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	Meredith Douglas	2900 NE 14th St, Unit 802	Pompano Beach, FL 33062	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 617, 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: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)