

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742167

**Entity Name:** VOYAGER CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2900 N.E. 14TH ST. CAUSEWAY  
POMPANO BEACH, FL 33062**Current Mailing Address:**2900 N.E. 14TH ST. CAUSEWAY  
POMPANO BEACH, FL 33062**FEI Number:** 59-2067262**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VOYAGER CONDOMINIUM  
2900 NE 14TH STREET  
VOYAGER OFFICE  
POMPANO BCH, FL 33062 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:** DIANA CABRA MEYER

03/18/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name CABRA-MEYER, DIANA  
Address 2900 NE 14TH ST UNIT 402  
City-State-Zip: POMPANO BEACH FL 33062

Title 1 VP  
Name HANNON, LISA  
Address 2900 NE 14 ST. UNIT 1009  
City-State-Zip: POMPANO BCH FL 33062

Title PRESIDENT  
Name SHIELDS, KATHY  
Address 2900 NE 14TH ST UNIT 107  
City-State-Zip: POMPANO BEACH FL 33062

Title TREASURER  
Name PORT, HOWARD  
Address 1215 E. HILLSBORO BLVD  
City-State-Zip: DEERFIELD BEACH FL 33441

Title 2 VP  
Name PHALEN, DEBORAH  
Address 2900 NE 14TH STREET CSWY  
UNIT 209  
City-State-Zip: POMPANO BEACH FL 33062

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KATHY SHIELDS

PRESIDENT

03/18/2022

Electronic Signature of Signing Officer/Director Detail

Date