

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006199

FILED
Feb 11, 2009
Secretary of State

Entity Name: VOYAGE OF DISCOVERY, INC.

Current Principal Place of Business:

3100 GENTIAN BLVD
CSU CUNNINGHAM CENTER OFFICE #308
COLUMBUS, GA 31907

New Principal Place of Business:

6671 WATERFORD COURT
COLUMBUS, GA 31904 US

Current Mailing Address:

P.O. BOX 162
COLUMBUS, GA 31902

New Mailing Address:

P.O. BOX 162
COLUMBUS, GA 31902 US

FEI Number: 58-2488225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RUTLAND, CAROLE
6671 WATERFORD COURT
COLUMBUS, GA, FL 31904 US

Name and Address of New Registered Agent:

RUTLAND, CAROLE
66 AVENUE D
APALACHICOLA, FL 32320 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:

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: RUTLAND, CAROLE
Address: P.O. BOX 162
City-St-Zip: COLUMBUS, GA 31902

Title: COC () Delete
Name: WINN, ELINOR
Address: 542 FRONT AVE
City-St-Zip: COLUMBUS, GA 31901

Title: VC () Delete
Name: PURCELL, DOUG
Address: P.O. BOX 33
City-St-Zip: EUFAULA, AL 360720033

Title: D () Delete
Name: WILSON, J. EDWARD
Address: P.O. BOX 1340
City-St-Zip: COLUMBUS, GA 319021340

Title: D () Delete
Name: PURCELL, DOUG
Address: PO BOX 33
City-St-Zip: EUFAULA, AL 36072

Title: D () Delete
Name: BOWDEN, PETER
Address: PO BOX 2768
City-St-Zip: COLUMBUS, GA 31902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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Title: () Change () Addition
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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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLE RUTLAND

DR

02/11/2009

Electronic Signature of Signing Officer or Director

Date