

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43454

FILED
Jan 26, 2008
Secretary of State

Entity Name: JOURNEY 5, INC.

Current Principal Place of Business:

464 HERITAGE VILLAGE DRIVE
APEX, NC 27502 US

New Principal Place of Business:

Current Mailing Address:

464 HERITAGE VILLAGE DRIVE
APEX, NC 27502 US

New Mailing Address:

FEI Number: 52-1272398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELSBERRY, MICHAEL V
215 NORTH EOLA DR
ORLANDO, FL 32801 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: D (X) Delete
Name: CHRISTY, JOHN J
Address: 464 HERITAGE VILLAGE DRIVE
City-St-Zip: APEX, NC 27502 US

Title: PD () Delete
Name: WHITEAKER, COLLEEN W
Address: 12814 GREENCASTLE RD
City-St-Zip: HAGERSTOWN, MD 21740 US

Title: D () Delete
Name: WHITEAKER, CANDACE G
Address: 12814 GREENCASTLE ROAD
City-St-Zip: HAGERSTOWN, MD 21740 US

Title: CFO () Delete
Name: WHITEAKER, MIRIAM R
Address: 11122 JADE COURT
City-St-Zip: HAGERSTOWN, MD 21740

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: WHITEAKER, COLLEEN W
Address: 464 HERITAGE VILLAGE DRIVE
City-St-Zip: APEX, NC 27502 US

Title: D (X) Change () Addition
Name: WHITEAKER, CANDACE G
Address: 1011 TIDINGS WAY
City-St-Zip: LELAND, NC 28451 US

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: COLLEEN WHITEAKER

PD

01/26/2008

Electronic Signature of Signing Officer or Director

Date