

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43454

Entity Name: JOURNEY 5, INC.

FILED  
May 27, 2009  
Secretary of State

## Current Principal Place of Business:

464 HERITAGE VILLAGE DRIVE  
APEX, NC 27502 US

## New Principal Place of Business:

47 CREST CIRCLE  
GARNER, NC 27529 US

## Current Mailing Address:

464 HERITAGE VILLAGE DRIVE  
APEX, NC 27502 US

## New Mailing Address:

47 CREST CIRCLE  
GARNER, NC 27529 US

FEI Number: 52-1272398      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## 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: PD ( ) Delete  
Name: WHITEAKER, COLLEEN W  
Address: 464 HERITAGE VILLAGE DRIVE  
City-St-Zip: APEX, NC 27502 US

Title: D ( ) Delete  
Name: WHITEAKER, CANDACE G  
Address: 1011 TIDINGS WAY  
City-St-Zip: LELAND, NC 28451 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: PD (X) Change ( ) Addition  
Name: WHITEAKER, COLLEEN W  
Address: 47 CREST CIRCLE  
City-St-Zip: GARNER, NC 27529 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 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

PR

05/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date