2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000043149

Entity Name: VOYAGER ENTERPRISES INC

FILED Feb 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4048 WEST KENNEDY BLVD 88005 OVERSEAS HWY SUITE 9

#654 #314

TAMPA, FL 336092750 US ISLAMORADA, FL 330363087 US

Current Mailing Address: New Mailing Address:

88005 OVERSEAS HWY SUITE 9 4048 WEST KENNEDY BLVD #654 #314

TAMPA, FL 336092750 US ISLAMORADA, FL 330363087 US

FEI Number: 59-3640100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOORE, DEBORA MOORE, DEBORA

4048 WEST KENNEDY BLVD 88005 OVERSEAS HWY SUITE 9 #654 #314

TAMPA, FL 336092750 US ISLAMORADA, FL 330363087 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: 02/28/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition PRFS () Delete Title: PRFS

Name: MOORE, JOHN R Name: MOORE, JOHN R 4048 WEST KENNEDY BLVD #654 88005 OVERSEAS HWY SUITE 9 #314 Address: Address:

City-St-Zip: TAMPA, FL 336092750 US City-St-Zip: ISLAMORADA, FL 330363087 US

Title: Title: (X) Change () Addition () Delete Name: MOORE, DEBORA A Name: MOORE, DEBORA A

4048 WEST KENNEDY BLVD #654 Address: 88005 OVERSEAS HWY SUITE 9 #314 Address: TAMPA, FL 336092750 US ISLAMORADA, FL 330363087 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORA MOORE TREA 02/28/2005