


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 15, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000004589 1. Entity Name VOYAGER BUSINESS CONCEPTS, INC.	
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Principal Place of Business 1435 AURORA RD SUITE B MELBOURNE, FL 32935	Mailing Address 1435 AURORA RD SUITE B MELBOURNE, FL 32935
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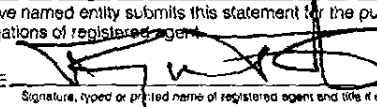
05092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FET Number 30-6005920	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TUTTERROW, TROY 1435 AURORA RD SUITE B MELBOURNE, FL 32935
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DO NOT WRITE IN THIS SPACE

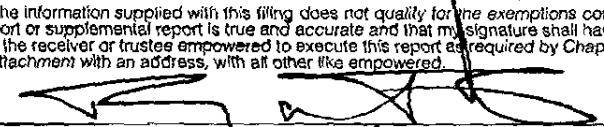
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
SIGNATURE  (NOTE: Registered Agent signature required when reinstating)
DATE 5/8/06

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TUTTERROW, TROY 1435 AURORA RD SUITE B MELBOURNE, FL 32935
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U000000565169
05/20/06-80114-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE:  (NOTE: Signature and typed or printed name of signing officer or director)
DATE 5/8/06
Daytime Phone #