

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 332102

Entity Name: VOYAGER GROUP, INC.**Current Principal Place of Business:**260 INTERSTATE NORTH CIRCLE, NW
ATLANTA, GA 30339**Current Mailing Address:**260 INTERSTATE NORTH CIRCLE, NW
ATLANTA, GA 30339 US**FEI Number:** 59-1236556**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	CAMPBELL, MICHAEL
Address	2677 N. MAIN STREET SUITE 600
City-State-Zip:	SANTA ANA CA 92705

Title	SECRETARY
Name	ARAGON-CRUZ, JEANNIE AMY
Address	701 WATERFORD WAY SUITE 600
City-State-Zip:	MIAMI FL 33126

Title	TREASURER
Name	KRONOW, RICKY
Address	260 INTERSTATE NORTH CIRCLE, NW
City-State-Zip:	ATLANTA GA 30339

Title	DIRECTOR
Name	BIONDO, REBEKAH SUSAN
Address	260 INTERSTATE NORTH CIRCLE, NW
City-State-Zip:	ATLANTA GA 30339

Title	DIRECTOR
Name	MADIGAN, DAVID
Address	260 INTERSTATE NORTH CIRCLE, NW
City-State-Zip:	ATLANTA GA 30339

Title	DIRECTOR
Name	SIEB, MARK EDWARD
Address	260 INTERSTATE NORTH CIRCLE, NW
City-State-Zip:	ATLANTA GA 30339

Title	DIRECTOR
Name	CAMPBELL, MICHAEL
Address	2677 N. MAIN STREET SUITE 600
City-State-Zip:	SANTA ANA CA 92705

I hereby 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 all other like empowered.

SIGNATURE: JEANNIE AMY ARAGON-CRUZ**SECRETARY****04/28/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date