

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212534662

1.) CORPORATION NAME:

MAGICAL VOYAGE LEARNING CENTER INC.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**MARSELLA S SANDERS
536 CHAPEL LAKE DRIVE
VIRGINIA BEACH, VA 23545**

SCC ID NO: **07414360**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

VIRGINIA BEACH CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 536 CHAPEL LAKE DRIVE
suite 202

CITY/ST/ZIP: VIRGINIA BEACH, VA 23545

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	MARSELLA S SANDERS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	536 CHAPEL LAKE DRIVE		
CITY/ST/ZIP/CO:	VIRGINIA BEACH, VA 23545		

NAME:	Marsella S Sanders	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	536 Chapel Lake Drive suite 202		
CITY/ST/ZIP/CO:	Virginia Beach , VA 23454		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARSELLA S SANDERS	MARSELLA S SANDERS,	9/10/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DIRECTOR PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.