

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 824712

FILED
Jan 06, 2004
Secretary of State

Entity Name: VARIETY STORES, INC.

Current Principal Place of Business:

218 S GARNETT STREET
HENDERSON, NC 27536

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 947
HENDERSON, NC 27536 US

New Mailing Address:

P.O. DRAWER 947
HENDERSON, NC 27536 US

FEI Number: 56-0382475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POPE, JOHN W
Address: 3401 GRESHAM'S LAKE RD
City-St-Zip: RALEIGH, NC 27619

Title: VP () Delete
Name: SAWYER, C W
Address: 3401 GRESHAM'S LAKE ROAD
City-St-Zip: RALEIGH, NC 27619

Title: DVST () Delete
Name: POPE, JAMES A
Address: 3401 GRESHAM'S LAKE ROAD
City-St-Zip: RALEIGH, NC 27619

Title: VPC () Delete
Name: SPRUNGER, BRANT
Address: 1000 FACET ROAD
City-St-Zip: HENDERSON, NC 27537

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: BRANT SPRUNGER

VP

01/06/2004

Electronic Signature of Signing Officer or Director

Date