

2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 22, 2009
Secretary of State**

DOCUMENT# K36282

Entity Name: VARIANCE, INC.

Current Principal Place of Business:

WINDRIDGE DR
DUNLAP, TN 37327 US

New Principal Place of Business:

1304 WINDRIDGE DR
DUNLAP, TN 37327 US

Current Mailing Address:

P.O. BOX 1447
DUNLAP, TN 37327 US

New Mailing Address:

FEI Number: 38-2831883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GABALSKI, GERRIE
4573 HUNTING TRAIL
LAKE WORTH, FL 33467 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: GABALSKI, SOPHIA
Address: P.O. BOX 1447 N/A
City-St-Zip: DUNLAP, TN 37327

Title: S () Delete
Name: GABALSKI, JEFFREY
Address: P.O. BOX 1447 N/A
City-St-Zip: DUNLAP, TN 37327

Title: DT () Delete
Name: GABALSKI, SCOTT
Address: P.O. BOX 1447 N/A
City-St-Zip: DUNLAP, TN 37327

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SOPHIA A. GABALSKI

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date