

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K47743

FILED
Apr 07, 2005
Secretary of State

Entity Name: THE VARSITY CLUB, INC.

Current Principal Place of Business:

1620 WELLS RD
ORANGE PARK, FL 32073 US

New Principal Place of Business:

669 KINGSLEY AVE
ORANGE PARK, FL 32073 US

Current Mailing Address:

C/O SHAWN STODDARD
669 KINGSLEY AVENUE
ORANGE PARK, FL 32073

New Mailing Address:

669 KINGSLEY AVE
ORANGE PARK, FL 32073

FEI Number: 59-2961037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STODDARD, SHAWN
265 FOXRIDGE ROAD
ORANGE PARK, FL 32065 US

Name and Address of New Registered Agent:

JOAN, MICHAEL
1235 FAIRWAY VILLAGE DR
ORANGE PARK, FL 32003 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: JOAN MICHAEL

04/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STODDARD, SHAWN,
Address: 265 FOXRIDGE ROAD
City-St-Zip: ORANGE PARK, FL

Title: SD () Delete
Name: MICHAEL, JOAN,
Address: 1235 FAIRWAY VILLAGE
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STODDARD, SHAWN
Address: 265 FOXRIDGE ROAD
City-St-Zip: ORANGE PARK, FL 32065

Title: SD (X) Change () Addition
Name: MICHAEL, JOAN
Address: 1235 FAIRWAY VILLAGE
City-St-Zip: ORANGE PARK, FL 32003

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: SHAWN STODDARD

PRES

04/07/2005

Electronic Signature of Signing Officer or Director

Date