2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L08000090632

Entity Name: VARSITY MOVING, LLC

Current Principal Place of Business:

19648 TIMBERBLUFF DR
LAND O LAKES, FL 34638 US

New Principal Place of Business:

10924 JUNIPERUS PL
TAMPA, FL 33618 US

Current Mailing Address:

19648 TIMBERBLUFF DR
LAND O LAKES, FL 34638 US

New Mailing Address:

10924 JUNIPERUS
TAMPA, FL 33618 US

FEI Number: 26-3418520 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HANSEN, JOSEPH
19648 TIMBERBLUFF DR
LAND O LAKES, FL 34638 US

Name and Address of New Registered Agent:

HANSEN, JOSEPH
10924 JUNIPERUS PL
TAMPA, FL 33618 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: JOSEPH HANSEN 04/29/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HANSEN, JOSEPH
Address: 19648 TIMBERBLUFF DR
City-St-Zip: LAND O LAKES, FL 34638 US

Title: MGRM ( ) Delete
Name: KURTS, ROBERT
Address: 6804 RENOWN WAY
City-St-Zip: SPRING HILL, FL 34606 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HANSEN, JOSEPH
Address: 10924 JUNIPERUS PL
City-St-Zip: TAMPA, FL 33618 US

Title: MGRM (X) Change ( ) Addition
Name: KURTZ, ROBERT
Address: 6804 RENOWN WAY
City-St-Zip: SPRING HILL, FL 34606 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSEPH HANSEN OWNE 04/29/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date