

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37366

FILED
Apr 25, 2005
Secretary of State

Entity Name: VARSITY SPIRIT CORPORATION

Current Principal Place of Business:

6745 LENOX CENTER CT
STE 300
MEMPHIS, TN 38115

New Principal Place of Business:

Current Mailing Address:

6745 LENOX CENTER COURT
SUITE 300
MEMPHIS, TN 38115

New Mailing Address:

FEI Number: 62-1169661 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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:	PCD	() Delete
Name:	WEBB, JEFFREY G	
Address:	6745 LENOX CENTER CT STE #300	
City-St-Zip:	MEMPHIS, TN 38115	
Title:	SEC	() Delete
Name:	NICHOLS, JOHN	
Address:	6745 LENOX CENTER CT STE #300	
City-St-Zip:	MEMPHIS, TN 38115	
Title:	SVP	(X) Delete
Name:	SHEPHERD, KRISTIN	
Address:	6745 LENOX CENTER COURT STE #300	
City-St-Zip:	MEMPHIS, TN 38115	
Title:	SVP	(X) Delete
Name:	WEBB, GREY	
Address:	6745 LENOX CENTER CT STE #300	
City-St-Zip:	MEMPHIS, TN 38115	
Title:	SVP	(X) Delete
Name:	BPYD, W KLINE	
Address:	6745 LENOX CENTER CT STE #300	
City-St-Zip:	MEMPHIS, TN 38115	

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: JOHN M NICHOLS

SEC

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date