

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000005316

**Entity Name:** SPORTSPLAN STUDIO LLC

**Current Principal Place of Business:**

6300 N. REVERE DR.  
KANSAS CITY, MO 64151

**Current Mailing Address:**

6300 N. REVERE DR.  
KANSAS CITY, MO 64151 US

**FEI Number:** 43-1904911

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DERREVERE, HAWKES, BLACK & COZAD  
2005 VISTA PARKWAY, SUITE 210  
WEST PALM BEACH, FL 33411 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SCOTT, PAMELA D  
Address 5421 NW FOXHILL ROAD  
City-State-Zip: KANSAS CITY MO 64152

Title MGR  
Name LEIDER, JOEL E  
Address 5421 NW FOXHILL ROAD  
City-State-Zip: KANSAS CITY MO 64152

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAMELA SCOTT

**PRESIDENT**

**01/20/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date