2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #821053

1. Entity Name WORLD WIDE SPORTSMAN, INC.



FILED Feb 11, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

81576 OVERSEAS HWY ISLAMORADA, FL 33036 2500 E. KEARNEY SPRINGFIELD, MO 65898

US



DO NOT WRITE IN THIS SPACE

No Chg-P 01182008

CR2E034 (11/05)

4. FEI Number 59-1198371

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HOMMELL JR., GEORGE 82245 OVERSEAS HWY. ISLAMORADA, FL 33036

DO NOT WRITE IN THIS SPACE

| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | | |
|---|---|---|---------------|--------------------------------|---|--|
| SIGNATURE Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | Election Campaign Financ Trust Fund Contribution | cing | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | CTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HAGALE, JIM 2508 E KEARNEY SPRINGFIELD, MO 65898 | | | | U00000824090 02/20/08-80064-004 150.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP MILLER, TONI 6040 SOUTH ROANOKE SPRINGFIELD, MO | | | | 06,200.00-00004-004-100.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | IN THIS SPACE | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | • | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if | | | | | | |