2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002768

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FARMINGTON, MO 63640

MCCLELLAND, BRENDA

878 HIGHWAY 60

MONETT, MO 65708

() Delete

FILED Apr 29, 2009 Secretary of State

Entity Nar	me: PLAYPO	OWER LT FARMINGTO	N, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
	10UNTAIN D TON, MO 63						
Current Mailing Address:				New Mailing Address:			
PO BOX 420 MONETT, MO 65708				878 E US HIGHWAY 60 MONETT, MO 65708			
FEI Number: 34-1725366 FEI Number Applied For ()		or () FEI Nui	FEI Number Not Applicable ()		Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1200 SOU PLANTATI The above		AND ROAD 24 US	for the purpose c	of changing it	ts registere	ed office or registered age	nt, or both,
	e of Florida.						
SIGNATUR		onic Signature of Regist	ered Agent			 Date	
Election Car		ng Trust Fund Contribution	_			Date	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANG	ES TO OFFICERS AND I	DIRECTORS:
Title: Name: Address: City-St-Zip:	BUSSEN, MA	JNTAIN DRIVE		Title: Name: Address: City-St-Zip:	13620 EAS	(X) Change () Addition R, GREGORY T REESE BLVD /ILLE, NC 28078	
Title: Name: Address: City-St-Zip:	DUVALL, KRI	JNTAIN DRIVE		Title: Name: Address: City-St-Zip:		(X) Change () Addition EDWARD T REESE BLVE /ILLE, NC 28078	
Title: Name: Address:	GUGGENBER) Delete RGER, TAMMY JNTAIN DRIVE		Title: Name: Address:	VPO CALDWELI #1 IRON M	(X) Change()Addition _, NEVIN OUNTAIN DRIVE	

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 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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FARMINGTON, MO 63640

() Change () Addition

SIGNATURE: BRENDA MCCLELLAND С 04/29/2009