

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morthman  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

DOCUMENT # P 94000039354  
1. Corporation Name:

HOK SPORTS FACILITIES GROUP, INC.

1995 MAR 20 PM 12: 27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400001436174  
-03/22/95--01042--005  
\*\*\*\*200.00 \*\*\*\*200.00  
DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
323 West 8th Street  
Kansas City, Missouri  
64105

2. Principal Place of Business		2a. Mailing Address	
21		26	211 No. Broadway
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	Suite 600
City & State		City & State	
23		28	St. Louis, MO.
Zip	Country	29	63102
24		30	USA

3. Date incorporated or qualified	3a. Date of Last Report
May 25, 1994	None
4. FEI Number	Applied For
43-1705779	<input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under § 199(3)(c), Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
C T Corporation System  
1200 South Pine Island Road  
City of Plantation, Florida 33324

10. Name and Address of New Registered Agent

B1	Name
B2	Street Address (P.O. Box Number is Not Acceptable)
B3	
B4	City
FL	B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_  
Type name and printed name of Registered Agent and the Corporation

SIGNATURE \_\_\_\_\_  
Type name and printed name of Registered Agent and the Corporation

12. OFFICERS AND DIRECTORS	
TITLE	President/Director
NAME	Jerome J. Sincoff
STREET ADDRESS	211 No. Broadway, Ste. 600
CITY ST ZIP	St. Louis, MO. 63102
TITLE	Vice President/Director
NAME	Ronald J. Labinski
STREET ADDRESS	323 West 8th Street
CITY ST ZIP	Kansas City, MO. 64105
TITLE	Vice President/Director
NAME	Raymond Chandler
STREET ADDRESS	323 West 8th Street
CITY ST ZIP	Kansas City, MO. 64105
TITLE	Secretary/Treasurer
NAME	Paul L. Watson
STREET ADDRESS	211 No. Broadway, Ste. 600
CITY ST ZIP	St. Louis, MO. 63102
TITLE	Assistant Secretary
NAME	Robert E. Staed, Jr.
STREET ADDRESS	211 No. Broadway, Ste. 600
CITY ST ZIP	St. Louis, MO. 63102
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12		
1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2	NAME	
3	STREET ADDRESS	
4	CITY ST ZIP	
5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6	NAME	
7	STREET ADDRESS	
8	CITY ST ZIP	
9	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10	NAME	
11	STREET ADDRESS	
12	CITY ST ZIP	
13	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14	NAME	
15	STREET ADDRESS	
16	CITY ST ZIP	
17	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18	NAME	
19	STREET ADDRESS	
20	CITY ST ZIP	

SEA  
3-20

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in law (see 1993) law, Florida Statutes, Chapter 607, that I am an officer or director of the corporation or the receiver or trustee empowered to receive the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE: Robert E. Staed, Jr. Robert E. Staed, Jr. 3/10/95 314-421-2000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR