

2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

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

DOCUMENT # P95000041586

1. Entity Name  
SPORTSMAN PARK DEVELOPMENT COMPANY



Principal Place of Business  
2500 E. KEARNEY ST.  
SPRINGFIELD, MO 65898

Mailing Address  
2500 E. KEARNEY ST.  
SPRINGFIELD, MO 65898

**DO NOT WRITE IN THIS SPACE**



01182008 No Chg-P CR2E034 (11/05)

4. FEI Number  
65-0626971

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MASTRIANA, F. RONALD  
1500 N. FEDERAL HWY.  
SUITE 200  
FT. LAUDERDALE, FL 33304

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P  
NAME HAGALE, JIM  
STREET ADDRESS 2500 E. KEARNEY ST.  
CITY-ST-ZIP SPRINGFIELD, MO 65898

TITLE V  
NAME MILLER, TONI  
STREET ADDRESS 2500 E. KEARNEY ST.  
CITY-ST-ZIP SPRINGFIELD, MO 65898

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000824088  
02/20/08-80064-003 150.00

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IN THIS SPACE**

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

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/2008 417-873-5000

Date

Daytime Phone #