# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 07, 2008 08:00 AM**
**Secretary of State**

DOCUMENT # P97000014154

1. Entity Name
MISSOURI TRADING COMPANY

| Principal Place of Business | Mailing Address |
|---|---|
| 8018 NW 100TH WAY<br>TAMARAC, FL 33321 US | 8018 NW 100TH WAY<br>TAMARAC, FL 33321 US |

03022008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number
65-0831785
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JOHNSON, KATHLEEN
8018 NW 100TH WAY
TAMARAC, FL 33321

**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**

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

U00000083586
04/17/08-80009-021 150.00

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | VP |
| NAME | ANDERSON, ROBERT T. |
| STREET ADDRESS | 435 PENNSYLVANIA #139 |
| CITY-ST-ZIP | GLEN ELLYN, IL 60137 |
| TITLE | P |
| NAME | JOHNSON, KATHLEEN |
| STREET ADDRESS | 8018 NW 100 WAY |
| CITY-ST-ZIP | TAMARAC, FL 33321 |
| TITLE | T |
| NAME | LUNDGREN, RICHARD G |
| STREET ADDRESS | 740 HORIZONS WEST, #202 |
| CITY-ST-ZIP | BOYNTON BEACH, FL 33435 |
| TITLE | S |
| NAME | BARLOW, JAMES |
| STREET ADDRESS | 3251A BAGNELL DAM BLVD, #118 |
| CITY-ST-ZIP | LAKE OZARK, MO 65049 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

**DO NOT WRITE 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

Robert T Anderson Pres.