

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M13000006928

**Entity Name:** NORTON & SCHMIDT CONSULTING ENGINEERS, LLC**Current Principal Place of Business:**311 E. 11TH AVE. NORTH  
KANSAS CITY, MO 64116**Current Mailing Address:**311 E. 11TH AVE. NORTH  
KANSAS CITY, MO 64116**FEI Number:** 01-0552618**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name RATKEWICZ, ANDREW T S P.E. PH  
Address 8117 NW FOREST DIVE  
City-State-Zip: KANSAS CITY MO 64152

Title MGR  
Name SOMMER, RODNEY W P.E.  
Address P.O. BOX 1032  
City-State-Zip: KEARNEY MO 64060

Title MGR  
Name SCHWABAUER, WARREN D JR, PE  
Address 11633 W. 101ST STREET  
City-State-Zip: OVERLAND PARK KS 66214

Title MANAGER  
Name DORAU, DAVID A  
Address 8326 GREENWOOD CIRCLE  
City-State-Zip: LENEXA KS 66215

Title MGR  
Name NELSEN, DAVID J P.E.  
Address 10203 DLEMAR  
City-State-Zip: OVERLAND PARK KS 66207

Title MGR  
Name HUTSON, EDWARD P JR  
Address 729 NW SILVER RIDGE DR.  
City-State-Zip: LEE'S SUMMIT MO 64081

Title MANAGER  
Name FEHNER, LAURENCE C  
Address 13313 MT. OLIVET  
City-State-Zip: SMITHVILLE MO 64089

Title MANAGER  
Name MEIERS, PAUL H  
Address 9409 ROBINSON  
City-State-Zip: OVERLAND PARK KS 66212

**Continues on page 2**

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EDWARD P. HUTSON JR.**MEMBER****01/18/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title           MANAGER  
Name           STROBACH, WILLIAM F  
Address        502 OAK DRIVE  
City-State-Zip: RAYMORE MO 64083

Title           MANAGER  
Name           DURRE, GARTH L  
Address        5312 N. MAIN STREET  
City-State-Zip: KANSAS CITY MO 64118

Title           MANAGER  
Name           SCHWABAUER, BRANDON S  
Address        12211 S. GALLERY STREET  
City-State-Zip: OLATHE KS 66062

Title           MANAGER  
Name           KELLY, CLARK T  
Address        1366 WILDBRIAR DRIVE  
City-State-Zip: LIBERTY MO 64068

Title           MANAGER  
Name           PHILLIPS, EDWARD H  
Address        14928 S. SUMMIT STREET  
City-State-Zip: OLATHE KS 66062