

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000000990

**Entity Name:** HRB SUPPLY LLC**Current Principal Place of Business:**ONE H&R BLOCK WAY  
KANSAS CITY, MO 64105**Current Mailing Address:**CORPORATE TAX DEPT  
PO BOX 32208  
KANSAS CITY, MO 64171-5208 US**FEI Number:** 26-1354964**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 VICE PRESIDENT, SECRETARY  
Name ANDREASEN, SCOTT W  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title VICE PRESIDENT, TREASURER  
Name CAMPBELL, JOEL L  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title VICE PRESIDENT  
Name FRANCHETT, TIM  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title ASSISTANT SECRETARY  
Name HAYNES, KATHARINE M  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title ASSISTANT TREASURER  
Name HORTON, MATTHEW B  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title AUTHORIZED MEMBER  
Name H&R BLOCK MANAGEMENT, LLC  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title VICE PRESIDENT  
Name WHITE, DANIEL J  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title ASSISTANT SECRETARY  
Name TIMMONS, NICHOLAS R  
Address ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

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*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:** SARA ARCHER

ASSISTANT TREASURER 04/10/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

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

Title            VICE PRESIDENT  
Name            LOGERWELL, KELLIE L  
Address        ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title            ASSISTANT TREASURER  
Name            ARCHER, SARA  
Address        ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105

Title            PRESIDENT  
Name            BOWEN, TONY G  
Address        ONE H&R BLOCK WAY  
City-State-Zip: KANSAS CITY MO 64105