

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 845533

Entity Name: LK ARCHITECTURE, INC.**Current Principal Place of Business:**345 RIVERVIEW
SUITE 200
WICHITA, KS 67203**Current Mailing Address:**345 RIVERVIEW
SUITE 200
WICHITA, KS 67203 US**FEI Number:** 48-0757137**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. 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

Officer/Director Detail :

Title DIRECTOR
Name HOFFMAN, DAVID L.
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title SECRETARY
Name HOFFMAN, DAVID L.
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title SENIOR VICE PRESIDENT
Name HOFFMAN, DAVID L.
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title DIRECTOR
Name SMITH, DENNIS D.
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title PRESIDENT
Name SMITH, DENNIS D.
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title ASSOCIATE VICE PRESIDENT
Name BERRY, STEVE E.
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title DIRECTOR
Name PORTER, MARC
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

Title CHAIRMAN OF THE BOARD
Name KERSCHEN, RICHARD
Address 345 RIVERVIEW
SUITE 200
City-State-Zip: WICHITA KS 67203

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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 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 above, or on an attachment with all other like empowered.

SIGNATURE: HOFFMAN, DAVID L.**SECRETARY****02/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSOCIATE VICE PRESIDENT
Name BEST, JEFF
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title TREASURER
Name SEGLEM, ROBYN
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title SENIOR VICE PRESIDENT
Name KRIER, LARRY
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title DIRECTOR
Name BROWN, ROGER L.
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title ASSISTANT SECRETARY
Name SEGLEM, ROBYN
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title VP
Name THOMPSON, DOUG
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title SENIOR VICE PRESIDENT
Name DOKKEN, DAN
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203

Title SENIOR VICE PRESIDENT
Name BROWN, ROGER L.
Address 345 RIVERVIEW
 SUITE 200
City-State-Zip: WICHITA KS 67203