

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005015

Entity Name: HARCROS CHEMICALS INC.**Current Principal Place of Business:**5200 SPEAKER ROAD
KANSAS CITY, KS 66106**Current Mailing Address:**5200 SPEAKER ROAD
TAX DEPARTMENT
KANSAS CITY, KS 66106 US**FEI Number:** 43-1935062**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**Officer/Director Detail :**

Title	D
Name	RADFORD, PETER P
Address	5200 SPEAKER ROAD
City-State-Zip:	KANSAS CITY KS 66106

Title	D
Name	MIRNER, KEVIN G
Address	5200 SPEAKER ROAD
City-State-Zip:	KANSAS CITY KS 66106

Title	T/S/D
Name	LOETHEN, MARK A
Address	5200 SPEAKER ROAD
City-State-Zip:	KANSAS CITY KS 66106

Title	D
Name	SAVAGE, PETER J
Address	5200 SPEAKER ROAD
City-State-Zip:	KANSAS CITY KS 66106

Title	D
Name	MORGAN, MARTIN D
Address	5200 SPEAKER ROAD
City-State-Zip:	KANSAS CITY KS 66106

Title	P/D
Name	HAMILTON, MARK W
Address	5200 SPEAKER ROAD
City-State-Zip:	KANSAS CITY KS 66106

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: MARK LOETHEN**TREASURER****03/17/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date