

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000001099

**FILED  
Mar 19, 2020  
Secretary of State  
0789629464CC**

**Entity Name:** POLSINELLI PC (INC)

**Current Principal Place of Business:**

900 WEST 48TH PLACE, STE 900  
KANSAS CITY, MO 64112

**Current Mailing Address:**

900 WEST 48TH PLACE, STE 900  
KANSAS CITY, MO 64112 US

**FEI Number:** 43-1064260

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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 PCEO  
Name SIMMONS, F. CHASE  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title DVPS  
Name ROSS, FRANK J JR.  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title TVP  
Name SANDERS, WILLIAM J  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

*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:** WILLIAM J SANDERS

**VICE  
PRESIDENT/TREASURER**

**03/19/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date