

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000001099

**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 CHAIRMAN/PRESIDENT/CEO  
Name SIMMONS, F. CHASE  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title DIRECTOR/VP  
Name ARNOLD, JANE E.  
Address 100 SOUTH 4TH STREET  
SUITE 1000  
City-State-Zip: ST. LOUIS MO 63102

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

Title DIRECTOR/VP  
Name KOHRING, KRAIG M  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title DIRECTOR/VP  
Name NICOL, FARAH S  
Address 555 FAYETTEVILLE STREET  
SUITE 720  
City-State-Zip: RALEIGH NC 27601

Title DIRECTOR/VP  
Name MURER, MATTHEW J  
Address 150 N RIVERSIDE PLAZA  
SUITE 3000  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR/VP  
Name DRAKE, DENISE K  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title DIRECTOR/VP  
Name BONACCORSI, MARY CLARE  
Address 150 N RIVERSIDE PLAZA  
SUITE 3000  
City-State-Zip: CHICAGO IL 60606

**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 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

**TREASURER**

**04/25/2023**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR/VP  
Name WOOLLEY, PATRICK C  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title DIRECTOR/VP  
Name SPASSER, LESLIE F  
Address 1201 W PEACHTREE ST NW  
SUITE 1100  
City-State-Zip: ATLANTA GA 30309

Title DIRECTOR/VP  
Name COHEN, NOEL S  
Address 2049 CENTURY PARK EAST  
SUITE 2900  
City-State-Zip: LOS ANGELES CA 90067

Title DIRECTOR/VP  
Name HOLLADAY, KOLIN B.  
Address 410 COMMERCE STREET  
SUITE 900  
City-State-Zip: NASHVILLE TN 37219

Title DIRECTOR/VP  
Name BELL, MARLA R  
Address 900 WEST 48TH PLACE, STE 900  
City-State-Zip: KANSAS CITY MO 64112

Title DIRECTOR/VP  
Name CHUQUIMIA, RUBEN K  
Address 100 S 4TH STREET  
SUITE 1000  
City-State-Zip: ST. LOUIS MO 63102

Title DIRECTOR/VP  
Name REINBERG, DANIEL S  
Address 150 N RIVERSIDE PLAZA  
SUITE 3000  
City-State-Zip: CHICAGO IL 60606

Title DIRECTOR/VP  
Name GUTTILLA, PHILLIP P  
Address ONE EAST WASHINGTON STREET  
SUITE 1200  
City-State-Zip: PHOENIX AZ 85004

Title DIRECTOR/VP  
Name PEGUES, MICHAEL D  
Address 2950 N HARWOOD STREET  
SUITE 2100  
City-State-Zip: DALLAS TX 75201

Title DIRECTOR/VP  
Name ALEXANDER, BARRY D  
Address 555 FAYETTEVILLE STREET  
SUITE 720  
City-State-Zip: RALEIGH NC 27601