

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023

Corporation

→ Filing period February 1 - May 1

→ Filing Fee \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31

FILED

MAR 16 2023

BY 91974

DS

1. Entity ID Number 000101379		2. Exact name of the Corporation BRR ARCHITECTURE INC			
3. Principal Office Address 8131 METCALE AVE, SUITE 300			City OVERLAND PARK	State KS	Zip 66204
4. NAICS Code 541310	6. Brief description of the character of business conducted in Rhode Island				
5. State of Incorporation MO	DESIGN SERVICES				
7. List ALL officers (names and addresses)					Check the box to indicate an attachment ☒ X
President Name MARTIN MEYER			Vice-President Name JAMES A HAILEY		
Street Address 106 LAKE OF THE FOREST			Street Address 20102 CANTERBURY DRIVE		
City BONNER SPRINGS	State KS	Zip 66012	City STILWELL	State KS	Zip 66085
Secretary Name ANDREW S MAASS			Treasurer Name JOHN P FRANK		
Street Address 228 VALLEY RD			Street Address 230 SE B STREET		
City MERION STATION PA	State	Zip 19066-1543	City BENTONVILLE	State AR	Zip 72712
8. List ALL directors (names and addresses)					Check the box to indicate an attachment ☐
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued		Check the box to indicate an attachment ☒ X	
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	
		10000	VOTING/COMMON	PAR VALUE	
				10	
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Representative					Date 3/9/23
Signature of Authorized Representative MARIAH MEYER					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

Rhode Island Statements

Statement 1 - Form RI 630, Line 7 - Names and Addresses of Officers

Pos	First Name	Last Name	Address	City	State	Zip
V	RICHARD	YAJORS, JR	11316 W. 160TH ST	OVERLAND PARK	KS	66221
V	BOYD W	RAU	635 W 61ST TERRACE	KANSAS CITY	MO	64113
V	SHAD	VERMEESCH	22309 N 36TH STREET	PHOENIX	AZ	85050
V	RACHEL A	TAYLOR	10575 W 157TH TERR.	OVERLAND PARK	KS	66221-9329
V	JOAN E	REDHAIR	6315 W 66TH	OVERLAND PARK	KS	66202
V	ROBERT	CISTON	7630 DARNELL ST	LENEXA	KS	66216
V	BRIAN	ROGGY	16005 GRANDVIEW ST	OVERLAND PARK	KS	66085
V	RYAN	ROSCH	1021 HIDDEN GLEN DR	ROUND ROCK	TX	78681
V	CAROL	BARTOLO	300 FALLING CREEK BEND	JOHNS CREEK	CA	30097
V	MARK C	SCHERRER	6020 LAKECREST DR.	SHAWNEE	KS	66218
V	TREVOR TYSON	HOLCOMB	609 JOHN CLOSE	MURPHY	TX	75094
V	PATRICK	BURKE	7892 SHIELD ROAD	FRISCO	TX	75035
V	DANNY	POPP	31741 W 168TH COURT	GARDNER	KS	66030
V	MEGAN	WHITMAN	1219 W 62ND STREET	KANSAS CITY	MO	64113-1510
V	NICOLE	CURRY	10321 WENONCA LANE	DEAWOOD	KS	66206
V	ZACHARY	SUMADA	12855 SACAMORE RD	DEAWOOD	KS	66209
V	DENNIS R	WILSON	5 TUXFORD CIRCLE	BELLA VISTA	AR	72714

Statement 2 - Form RI 630, Line 10 - Issued Shares

Number of Shares	Class/Series	Par Value
79000	NON-VOTING	10

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