State of Rhode Island Department of State - Business Services Division Annual Report for the year: 2024 Corporation → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31 1. Entity ID Number 2. Exact name of the Corporation 000112108 Clark, Richardson & Biskup Consulting Engineers Inc. 3. Principal Office Address City State Zip 64116 1251 NW Briarcliff Pkwy, STE 500 Kansas City MO 6. Brief description of the character of business conducted in Rhode Island 4. NAICS Code Performance of Design work and any other business related work as permitted by law. 541330 5. State of Incorporation Missouri Check the box to indicate an attachment List ALL officers (names and addresses) Vice-President Name None President Name Lee Emel Street Address 1251 NW Briarcliff Pkwy, STE 500 Street Address State City State Kansas City MO 64116 Secretary Name Courtney Holt Treasurer Name Derrick Green Street Address 1251 NW Briarcliff Pkwy, STE 500 Street Address 1251 NW Briarcliff Pkwy, STE 500 City Kansas City State State Zıp 64116 Kansas City MO 64116 Check the box to indicate an attachment 8. List ALL directors (names and addresses) Director Name Director Name Daniel Backman Eric Unrau Street Address Street Address 1251 NW Briarcliff Pkwy, STE 500 1251NW Briarcliff Pkwy, STE 500 Z.p 64116 MO Kansas City Kansas City MO 64116 Director Name Director Name Shannah Falcone Street Address Street Address 1251 NW Briarcliff Pkwy, STE 500 <sup>Zip</sup> 64116 City Kansas City City State MO Check the box to indicate an attachment 9. Shares Authorized 10. Shares Issued NUMBER OF SHARES CLASS/SERIES This information is currently of record in the Department of State. 0 80,000 Α Changes require an additional filing. 20,000 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. 👚 📻 🚓 Date Name of Authorized Representative 10/22/2024 Courtney Holt Signature of Authorized Representative Courty Let Lit Division of Business Services

RI SOS Filing Number: 202460834430 Date: 10/25/2024 3:02:00 PM

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FORM 630- Revised 12/2023