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INSTRUCTIONS FOR FILING AN INFORMATION REPORT

Note: All documents filed by the Secretary of State's office are considered public record and may be viewable online. File this document directly online at https://www.sos.ks.gov/businesses/information-reports.html.

How to complete the information report for a professional association:

Each of the numbered instructions below corresponds to a section on the form.

- List the business entity's ID number issued by the Kansas Secretary of State (this is not a tax ID number). ID numbers may be found by clicking on Business Entity Database at https://www. sos.ks.gov/eforms/BusinessEntity/Search.aspx.
- 2. Provide the complete legal business entity name, including words of formation (e.g., PA, Chartered., etc.)
- 3. Provide the principal office of the business entity.

Principal office: Must be a physical address that must include the building number, street, city, state, and zip code. This can't be a PO box. **Do not leave blank.**

4. Provide the reporting year for the information report. This year must reflect the year the report was due.

For revivals and foreign applications only: Review the instructions for the revival or foreign application to determine the number of information reports needed.

- 5a. Each name of the officers of the professional association must be named along with a title for the officer and the address where they may be regularly located.
- 5b. Provide each name of the directors for for-profit professional associations or members of the governing body for not-for-profit professional associations along with the address where they may be regularly located. The directors may be omitted if the officers are the same individuals.
- 5c. If the professional association issues shares, provide the names of each shareholder or if the professional association doesn't issue shares, provide the name of each member along with the address of each.
- Indicate if each person is a qualified person pursuant to K.S.A. 17-2707 for the named individuals in section 5a, 5b, or 5c. If any of the individuals named aren't qualified, a response must be provided in section 7 and 8. If all individuals are qualified, review section 8 and provide a response if applicable.

- 7. Provide the name of each individual who isn't qualified as defined by K.S.A. 17-2707.
- Provide the beginning date that shares or memberships were held by an individual who isn't qualified as defined by K.S.A. 17-2707 and the name of the individual who held the shares or memberships.
- 9. An authorized person on behalf of the entity must sign.

Fee Schedule

Information Report

The filing fee for the information report is as follows:

For-profit professional association:	
Online Information Report:	\$100
Paper Information Report:	
Not-for-profit professional association:	
Online Information Report:	\$80
Paper Information Report:	\$80

Filing Online

The information report may be filed directly online at https://www.sos. ks.gov/businesses/information-reports.html.

Mail to:

Kansas Secretary of State Memorial Hall, 1st Floor 120 SW 10th Avenue Topeka KS 66612

Only checks are accepted for payment. Make checks payable to the Kansas Secretary of State.

IDA Information F		Information I	ETARY OF STATE Report Sessional Association			
12	20 S.W. 10t	ll, 1st Floor h Avenue 66612-1594	(785) 296-4564 kssos@ks.gov sos.ks.gov			
	number:	entity ID/file				
2.	Must match n	orporation: ame on record Secretary of State.				
3.	-	ile. e blank.	Street Address (A PO box is unacceptab	le.) (Required)	Zip	Country
4.	Reporting	year:	Year			
5a.	Name, title, and address of each officer of corporation: Title and address required for each officer		Name	Title		
			Address	State	Zip	Country
r	named.		Name	Title		
			Address			
	Do not leave	blank.	City	State	Zip	Country
			Name	Title		
			Address			
	If additional s	pace is needed, e attachment.	City	State	Zip	Country

5b.	Name and address of each of the directors/ members of the governing body: Leave this question blank if the directors/members of the governing body and officers are the	Name Address			
		City	State	Zip	Country
		Name	Address		
	same. If additional space is needed, please provide attachment.	City	State	Zip	Country
. <u>.</u>		L			
5c.	Name and address of each shareholder/ member:	Name	Address		
	member.	City	State	Zip	Country
	Leave this question				
	blank if the shareholders/ members and officers are the same.	Name	Address		
	If additional space is needed, please provide attachment.	City	State	Zip	Country
6.	Is each officer, director/me K.S.A. 17-2707 for the repo	mber of the governing body, and share orting year?	holder/m	ember a qualified	d person as defined by

Only a qualified person may be a shareholder of a professional corporation (K.S.A. 17-2712). *Exception: A certified public accountant (K.S.A. 1-308)*. No person may be a director or officer, other than the secretary, of a professional corporation unless that person is a shareholder (K.S.A. 17-2713).

Yes (Complete 8, if applicable.) No (Complete 7 and 8, do not leave blank.)

7.	List each of the officers, directors/members of the governing body, and shareholders/members who are not qualified as defined by statute:	Name	Name
		Name	Name
		Name	Name

	For the reporting year this information report covers, list the dates that any shares/memberships of the corporation were no longer owned by a qualified person and the names of the shareholders/members:	Date	Name
		Date	Name
		Date	Name

9. I declare under penalty of perjury pursuant to the laws of the state of Kansas that the foregoing is true and correct.			
Signature of Authorized Person (Required)	Title/Position (Required)		
х			
Name of Signer (printed or typed)		Phone Number (Not required)	