Name of owner: Hewlett Jake Bray	<u>dley</u> Owner's	s telephone number: $913 - 626 - 7750$
Owner's address: 2029 Wyandotte	2 St, #406	, KC, MO, 64108
IF SIGNER IS DIFFERENT FROM OWN	NER:	
Name of signer:		
State Basis of Legal Authority to Sign:		
Signer's telephone number:		
Signer's mailing address:		
If owner is an individual:	Single	Married
If owner is not an individual, state what type of	of entity (Mark App	licable Box):
Corporation	General Partn	ership

corporation	Ocherar Farmership	
 Limited Partnership	Limited Liability Company	
Partnership	Urban Redevelopment Corporation	
 Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-01-0-04-005	352	\$ 60,239.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 1/30/23, 2023

Signature of person signing for owner

STATE OF Missouri) ss COUNTY OF Sallson

On this <u>30</u> day of <u>November</u> 2023, before me personally appeared <u>Jake</u> Newlett to me personally known to be the individual described in and who executed the foregoing instrument.

 30^{th} day of November 2023. WITNESS my hand and official seal this

My Commission Expires: 9/18/2027



ALEXANDER PROFFER NOTARY PUBLIC - STATE OF MISSOURI JACKSON COUNTY MY COMMISSION EXPIRES: 09/18/2027 COMMISSION# 23031043

Name of owner: Holsinger Kristi B& Alexander M Owner's telephone number: <u>9139804749</u> Owner's address: <u>1819 Battimore Ave</u> , #307 KC MO 6468			
Owner's address: 1819 Battimore	Ave, #307 KC MO 64108		
IF SIGNER IS DIFFERENT FROM OV	WNER:		
Name of signer:	visti tolsinger		
State Basis of Legal Authority to Sign:			
Signer's telephone number: 9139804749			
Signer's mailing address:			
If owner is an individual: Single Married			
If owner is not an individual, state what type of entity (Mark Applicable Box):			
Corporation	General Partnership		
Limited Partnership	Limited Liability Company		
Partnership	Urban Redevelopment Corporation		

Other

Parcel Number(s) from Exhibit B:

366

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

) ss

Not-for-Profit Corporation

Tax Parcel Number(s):

Signature of person signing for owner

29-520-12-13-00-0-03-004

STATE OF MISSOURI

<u>}</u>, 2023 Date:

Assessed Value(s):

\$11,3050.00

COUNTY OF JACKSON On this 1st day of August 2023, before me personally appeared Knst; Holsinger to me personally known to be the individual described in and who executed the foregoing instrument.

157 day of August, 2023. WITNESS my hand and official seal this

My Commission Expires:

Notary Public Printed Name of Notary: David Johnson

DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI **Jackson County** My Commission Expires: June 11, 2027 Commission #12354166

Name of owner: Horn Zach	Owner	's telephone r	umber: <u>8/6-5/0-0360</u>
Owner's address: 1535 WALNU	1 57 \$ 504	Kcmo	64108
IF SIGNER IS DIFFERENT FROM	OWNER:		
Name of signer:			
State Basis of Legal Authority to Sign: _			
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual:	Single	Married	
If owner is not an individual, state what ty	ype of entity (Mark Ap	plicable Box)	:
Corporation	General Part	tnership	

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-05-007	295	\$54,525.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person/signing for owner

)

Date: 2/7/24, 2026

STATE OF MO) ss COUNTY OF Jackson

On this $\underline{7}$ day of $\underline{\text{Feb}}$ 2021, before me personally appeared \underline{Zach} Horn to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 7+h day of Feb, 2021.

bission Expires: 01/12/2027

" and the second second second

Abby Price Notary Public Printed Name of Notary: <u>Alfuller</u>

Name of owner: Lillian Horvi	HZ Ow	ner's telephone numbe	r: <u>669-605-07</u> 89
Owner's address: 2030 Grand	Ave. Unit 2	KCM0 64108	
IF SIGNER IS DIFFERENT FROM			
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:	·····		
If owner is an individual:	Single	Married	
If owner is not an individual, state what	type of entity (Mark	Applicable Box):	
Corporation	General I	Partnership	
Limited Dorthorship	I imited I	iability Company	

	Limited Partnership	Limited Liability Company
-	Partnership	Urban Redevelopment Corporation
	Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-35-08-00-0-01-001	435	\$ 87780.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

7/2023, 2023 Date:

Signature of person signing for owner

STATE OF MO COUNTY OF Jackson) ss)

On this <u>1</u> day of <u>November</u> 2023, before me personally appeared <u>Lillian Horvitz</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this ______ day of _____, 2023.

on Expires: 01/12/2027

Notary Public Printed Name of Notary: Abby Price

n Hungry D	By Holding's LLC SEY Owner's telephone number: <u>913, 207, 3</u> 790
Name of owner: CARCA HUS	SE9 Owner's telephone number: <u>913, 207, 3</u> 790
Owner's address: 732 N 57 th	"St, Kansas City. KS 66102
IF SIGNER IS DIFFERENT FROM	OWNER: 0
Name of signer:	Carla Hussey
State Basis of Legal Authority to Sign:	OWNEN
Signer's telephone number:	913.207.3790
Signer's mailing address:	732 N 57 St. KCKS 66102
If owner is an individual:	Single Married
If owner is not an individual state what t	tran of antity (Mark Appliable Day)

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
 Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-11-11-00-0-01-002	323	\$60,648.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 9-14 2023

Signature of person signing for owner

STATE OF <u>MO</u>)) ss COUNTY OF JackSon)

On this <u>14</u> day of <u>September</u> 2023, before me personally appeared <u>Carla Hussey</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 14th day of <u>September</u> 2023.

Ession Expires: 01/12/2027

"HILLING CONTRACTOR

Notary Public Printed Name of Notary: Abby Price

Name of owner: Jersey Hold	Lings LCC Owner's telephone number: 816718-6206
Owner's address: 2029WYA	NOTTE STE 10/ Kansas Lity. MO. 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	PAULWEBER
State Basis of Legal Authority to Sign:	MISSOURI - DWINE
Signer's telephone number:	8167186206
Signer's mailing address:	5601 W.127TH TEN D.P. KS 66209
If owner is an individual:	Single Married
If owner is not an individual state what	type of entity (Mark Applicable Box):

type of entity (m

Corporation		General Partnership
Limited Partnership	×	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	n	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-01-0-01-001	352	\$ 209,632.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 11. 30-, 2023

STATE OF <u>Missouri</u>) ss COUNTY OF <u>Jackson</u>) ss

On this 30^{M} day of <u>November</u>2023, before me personally appeared <u>Paul</u> <u>Weber</u> to me personally known to be the individual described in and who executed the foregoing instrument. 30th

WITNESS my hand and official seal this _____

My Commission Expires: 9/18/2027

Notary Public Printed Name of Notary: <u>Alexander</u> Proffer

_day of November, 2023.



Name of owner: Johnson Beryl T	- Trustee Owner	's telephone number: 561-329-9152 -105, KC. NO · 64108
Owner's address: 1819 Bal'fin	nore Are #	105, KC. no. 64108
IF SIGNER IS DIFFERENT FROM O		
Name of signer:	ana ana amin'ny amin'ny faritr'i Andre ana amin'ny faritr'o amin'ny faritr'o amin'ny faritr'o amin'ny faritr'o	
State Basis of Legal Authority to Sign:	ana ana ana ang ang ang ang ang ang ang	
Signer's telephone number:		
Signer's mailing address:	elegister del pflique del del del production de distance de service de la companya de la companya de la company	
If owner is an individual:	Single	_ Married
If owner is not an individual, state what typ	be of entity (Mark Ap	plicable Box):
Corporation	General Part	nership

Corporation	General Partnership
 Limited Partnership	Limited Liability Company
 Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-250-12-13-00-0-01-001	366	\$79,040.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 10/18/, 2023

STATE OF MISSOUR) ss)

)

On this 184 day of October 2023, before me personally appeared Bery 1 Johnson to me personally known to be the individual described in and who executed the foregoing instrument.

184 WITNESS my hand and official seal this day of October, 2023.

Notary Public Printed Name of Notary: David John Son

My Commission Expires:

DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI **Jackson County** My Commission Expires: June 11, 2027 **Commission #12354166**

Name of owner: David Johnson	n	Owner's	s telephone number: _	816-305-5817
Owner's address: 1819 Baltimo	re #1	03. Kan	sas City, MO 64	108
IF SIGNER IS DIFFERENT FROM O	WNER:		,	
Name of signer:				
State Basis of Legal Authority to Sign:				
Signer's telephone number:				
Signer's mailing address:				
If owner is an individual:	Siı	ngle	Married	
If owner is not an individual, state what typ	pe of entity	y (Mark App	licable Box):	
Corporation	0	General Partn	ership	

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-0]-	366	55,100

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

31, 2023 8 Date:

Signature of person signing for owner

)) ss

)

STATE OF <u>Mo</u>

COUNTY OF Jackson

On this <u>31</u> day of <u>August</u> 2023, before me personally appeared <u>David</u> <u>Johnson</u> to me personally known to be the individual described in and who executed the foregoing instrument.

315+ _____day of <u>August</u>, 2023. WITNESS my hand and official seal this



Notary Public Printed Name of Notary: <u>Abby Price</u>

Name of owner: K Douglas Properties LLC Owner's telephone number: 913-927-6834Owner's address: 1901 W 68th St Mission Hills, KS 66208

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer: Kyle Dougl	as
Name of signer: Kyle Doug State Basis of Legal Authority to Sign: _	owner
Signer's telephone number:	913.927.6834
Signer's mailing address:	1901 W. 68mst. Mission
	Hills, KS. 66208
If owner is an individual:	Single X Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnersh	ip	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Cor	poration	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-07-006	295	57420

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

3/ ,2024 Date: 7/

STATE OF <u>Comsas</u>)

COUNTY OF JOINTS 1

On this 31° day of 32° day of 32° and 32° and 32° and 32° day of 32° and 32° and 32° and 32° and 32° day of 32° and 32° a

WITNESS my hand and official seal this _

SS

day of ____ SI

My Commission Expires:

Notary Public Printed Name of Notary: .

ALEX	SMITH
	State of Kansas
My Commission Ex	pires 06 16 , 2010

Name of owner: Kelley Sean R & Hubbell J Owner's address: <u>2/20</u> <i>Wy</i> <i>IF SIGNER IS DIFFERENT FROM</i>	andutie 0	one number: _ 	<u>\$16.863.841</u> 2.64108
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:			
	0' 1	۲ . ۲	

If owner is an individual: _____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership	
Limited Partnership	Limited Liability Company	
Partnership	Urban Redevelopment Corporation	
Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400001008	222	\$45,221.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF Missouri) ss

Date: September 15, 2023

COUNTY OF Jackson) On this 15 day of <u>September</u> 2023, before me appeared <u>Sean Kelley</u>, to me personally known, who, being by me duly sworn did say that he/she/they is the <u>Owner</u> of ______ and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this _____

My Commission Expires: AI 26 24

De 2023. 15 day of Lisa laylor Printed Name of Notary:

LISA TAYLOR	
NOTARY PUBLIC - NOTARY SEA	L
STATE OF MISSOURI	
MY COMMISSION EXPIRES NOVEMBER	26, 2024
JACKSON COUNTY	
COMMISSION #12417868	

Name of owner: Kevin P Martinez & Kristi M Martinez Revocable Living Trust

Owner's telephone number: <u>8/6-918-7170</u>

Owner's address: 2029 Wyandotte St, Unit 404 Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Kevin Martinez
State Basis of Legal Authority to Sign: _	OWNer
Signer's telephone number:	816.918.7170
Signer's mailing address:	2029 Wy and offer, Wit 404
-	KCMO HINT
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership	
Limited Partnership		Limited Liability Company	
Partnership		Urban Redevelopment Corporation	
Not-for-Profit Corporation	×	Other <u>Revocable Living</u> Trust	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-01-0-04-007	352	\$86,013

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 1/-06 , 2024

Signature of person signing for owner

STATE OF Missurgi) COUNTY OF JACKSON) ss

On this May of Man 2024, before me personally appeared Kevin P. Marfinez, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this $4\frac{44}{124}$ (day of VAREnhr2024.

14/2024 My Commission Expires:

Notary Public - Notary Se Comm. Number 1149216 STATE OF MISSOURI Jackson County mmission Expires Dec. 1

Notary Public Printed Name of Notary: MIE BOWM

Name of owner: RICARDO Kols	Owner's telephone number: <u>913-220-4312</u>
	- LOFT ZOR, KC, MO GALOP
IF SIGNER IS DIFFERENT FROM O	WNER:
Name of signer:	KARDO Kalster)
State Basis of Legal Authority to Sign:	OWNOR (SAME
Signer's telephone number:	913-220-4312
	535 Welwit
If owner is an individual:	Single Married
If owner is not an individual, state what typ	e of entity (Mark Applicable Box):
Corporation	General Partnership

Corporation	Seneral i artherenip	
 Limited Partnership	Limited Liability Company	
Partnership	Urban Redevelopment Corporation	
Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-07-002	295	112100.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: Feb 7, 2024 -2023

Signature of person signing for owner

STATE OF ______) ss COUNTY OF ______) ss On this <u>7</u> day of <u>Feb</u>. 2024, before me personally appeared <u>Ricardo Kolster</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 7th day of Feb , 2023. 24

ission Expires: 01/21/2027 Annual annual ann

Notary Public Printed Name of Notary: <u>Appy Price</u>

Name of owner: Krebs Douglas Mc	Susan H - Owner	's telephone number: _	913-827-6549
Name of owner: <u>Krebs Douglas Mc</u> Owner's address: <u>1535 Walnut Stree</u>	et # 408 1 Kar	ISAS City	
IF SIGNER IS DIFFERENT FROM O		7	
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual:	Single	_ Married	
If owner is not an individual, state what typ	be of entity (Mark App	plicable Box):	
Corporation	General Part	perchin	

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-04-003	295	\$75,156

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Susan H. Krebz Signature of person signing for owner

Date: December 8, 2023

STATE OF <u>Missour</u>)) ss COUNTY OF <u>JulkSon</u>) On this <u>8</u> day of <u>December</u> 2023, before me personally appeared <u>Susan |Lrebs</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

the day of **December** 2023.

My Commission Expires:

Muy Schnitzlein Notary Public Printed Name of Notary: <u>Hiley Schnitzlein</u>

KILEY E. SCHNITZLEIN Notary Public-Notary Seal STATE OF MISSOURI Jackson County My Commission Expires 12/22/2026 Commission # 22970004

Name of owner: Elizabeth Langen walter	Owner's telephone number: $913 \cdot 908 \cdot 7462$	
Owner's address: 1904 Main St. 5-5 Raylansas City, MD 64108		
IF SIGNER IS DIFFERENT FROM OWNE	<i>R</i> :	
Name of signer:		
State Basis of Legal Authority to Sign:		
Signer's telephone number:		
Signer's mailing address:		
If owner is an individual:	Single Married	
If owner is not an individual, state what type of e	entity (Mark Applicable Box):	
Corporation	General Partnership	

corporation	Content in a children in p	
Limited Partnership	Limited Liability Company	
Partnership	Urban Redevelopment Corporation	
Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-21-15-00-0-05-061	378	\$ 114,095.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

<u>AULT MAREMENTERS AUX</u> Signature of person signing for owner

Date: 9.15,2023

STATE OF Hansas)) ss COUNTY OF Johnson

On this <u>15</u>th day of <u>September</u> 2023, before me personally appeared <u>Elizabeth</u> <u>Langenwalker</u> <u>Ray/</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 15^{++} day of September, 2023.

My Commission Expires: 02/25/2025

Notary Public Printed Name of Notary: Jacob A Crawshaw

JACOB A. CRAWSHAW Notary Public - State of Kansas My Appointment Expires 02

Owner's telephone number: 617 592 7721 Name of owner: LeRay Andrea L Owner's address: 1819 Baltimore St #207 Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Andrea LeRay
State Basis of Legal Authority to Sign:	
Signer's telephone number:	617 592 7721
Signer's mailing address:	1819 Baltimore Ave #207
	Kansas City, MO 64108
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership	
Limited Partnership	Limited Liability Company	
Partnership	Urban Redevelopment Corporation	
Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-02-006	366	\$78,280
		κ.

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

-P/ -le

Signature of person signing for owner

STATE OF Misson) ss COUNTY OF JACKSON

Date: ____ ____, 2024

On this <u>17</u> day of <u>October</u> 2024, before me personally appeared <u>Andrea Le Ray</u> personally known to be the individual described in and who executed the foregoing instrument. , to me

WITNESS my hand and official seal this

JUly, 25, 2027

My Commission Expires:

Notary Public Printed Name of Notary: Jasmine Brooks

day of October. 2024.

JASMINE BROOKS Notary Public - Notary Seal State of Missouri Commissioned for Jackson County My Commission Expires: July 25, 2027 Commission Number: 18260064

 Name of owner: Lysinger James F & Catherine J
 Owner's telephone number: (\$16) 787-1343

 Owner's address:
 2120 Wyandotte St Unit 19 KCM0 69(08

 IF SIGNER IS DIFFERENT FROM OWNER:

 Name of signer:

 State Basis of Legal Authority to Sign:

Signer's telephone number:

Signer's mailing address:

If owner is an individual: _____ Single _____ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400003004	222	\$121,600.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: September 15 2023

STATE OF MISSOUR

COUNTY OF Jackson) On this 15 day of <u>September</u> 2023, before me appeared <u>James Usinger</u>, to me personally known, who, being by me duly sworn did say that he/she/they is the <u>ower</u> of ______ and that said instrument was signed by him/her/them on behalf

of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this _____

) ss

My Commission Expires: 11 26 24

day of Zeptembo023. 15 er laylor

Notary Public **913.219.3972** Printed Name of Notary:

LISA TAYLOR
NOTARY PUBLIC - NOTARY SEAL
STATE OF MISSOURI
MY COMMISSION EXPIRES NOVEMBER 26, 2024
JACKSON COUNTY
COMMISSION #12417868

Name of owner: Madden Christop	pher A Owner's telephone number: <u>814 - 207 - 991</u> 3
Owner's address: 1803 Wyondoff	e St. Apt. 202, Kansas City, MO 64108
IF SIGNER IS DIFFERENT FROM	
Name of signer:	Christopherl. Madden
State Basis of Legal Authority to Sign: _	
Signer's telephone number:	
Signer's mailing address:	
If owner is an individual:	Single Married
If owner is not an individual, state what ty	/pe of entity (Mark Applicable Box):
Corporation	General Partnership
T' ' 1D (1'	

Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-11-11-00-0-62-001	323	\$\$\$2,250.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

ristoplie a. Madde

Signature of person signing for owner

STATE OF <u>Mo</u>)) ss COUNTY OF <u>Jackson</u>)

Date: 6 August, 2023

On this <u>16</u> day of <u>August</u> 2023, before me personally appeared <u>Christopher A Madden</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WHTNESS my hand and official seal this _	day of <u>August</u> , 2023.
Add	Notary Public Printed Name of Notary: <u>Abby</u> Price

Name of owner: Maloney Paul & Samanth	a Owner's	s telephone number: (770	842-2869
Owner's address: ZZO Wyands / +C			
IF SIGNER IS DIFFERENT FROM		1	
Name of signer:	Paul Maloney		
State Basis of Legal Authority to Sign:	/		
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual:	Single	Married	
If owner is not an individual, state what	type of entity (Mark App	licable Box):	
F			

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400002007	222	\$46,550.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: September 15, 2023

STATE OF Missouri COUNTY OF JACKSON

On this 15 day of September 2023, before me appeared Paul Malone/ me personally known, who, being by me duly sworn did say that he/she/they is the winder , to

of and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this

) ss

My Commission Expires: 11 26 24

15	day of	september	023.
EL	. (]		
No	10 la	DOY	
(Are		IOV	
Notary P	ublic 🗸 🗸	Lisa	Taylor
Printed N	Jame of Nota	Irv:	1 ady lor

	LISA TAYLOR
	NOTARY PUBLIC - NOTARY SEAL
	STATE OF MISSOURI
	MY COMMISSION EXPIRES NOVEMBER 26, 2024
	JACKSON COUNTY
	COMMISSION #12417868
۵	

Name of owner: Mark 1 Ensman Bevocable Trust Owner's telephone number: 913-707-081 Owner's address: 1819 Baltimore Ave #404, Kancas City, MO. 6408

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Mark Ensman	
State Basis of Legal Authority to Sign:	owner	
Signer's telephone number:	913, 202 0811	
Signer's mailing address:	1819 Baltimore Avz, # 404. KCMO 641	68
If owner is an individual:	Single Married	

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	Limited Liability Company	
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	X	Other Ivar

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-04-003	366	\$138,891.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF MISSOUR

) ss COUNTY OF JACKSON On this $3)^{s^*}$ day of <u>August</u> 2023, before me personally appeared <u>Mark Ensman</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 315+

_____day of <u>August</u>, 2023.

My Commission Expires:

DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI **Jackson County** dasion Expires: June 11, 2027 **Commission #12354166**

Notary Public Printed Name of Notary: David Johnson

O[2]O[1]	1
Name of owner: Marker Dennis C-Tr Owner's telephone number: <u>113-314-6300</u>	
Owner's address: 1803 Wyands the Hor Kansas City, MO 64108	
IF SIGNER IS DIFFERENT FROM OWNER:	
Name of signer: Dennis / an Ken	
State Basis of Legal Authority to Sign:	
Signer's telephone number: <u>913,314,6362</u>	
Signer's mailing address: 1216 W. 57 " gew. 160 64113	
If owner is an individual: Single Married	
If owner is not an individual, state what type of entity (Mark Applicable Box):	
Corporation General Partnership	

	Corporation		General Farmership	
	Limited Partnership		Limited Liability Company	
	Partnership		Urban Redevelopment Corporation	
1	Not-for-Profit Corporation	X	Other Trust	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-11-11-00-0-02-006	323	\$49,951.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

NMD Signature of person signing for owner

STATE OF <u>Mo</u>) ss COUNTY OF Jackson

Date: 7 , 2023

On this <u>31</u> day of <u>August</u> 2023, before me personally appeared <u>Dennis Marker</u> to me personally known to be the individual described in and who executed the foregoing instrument.

_____day of <u>August</u>, 2023. 31 WITNESS my hand and official seal this Aby Price. Notary Public Printed Name of Notary: <u>Myfle</u> in Expires: SOURI MANNAMANA

Name of owner: Matthew E Rowland	Revocable Owner's telephone number: 816-729-5705
Owner's address: 1819 Baltin	nore Ave # 306 KCM0 64108
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Matthew Rowland
State Basis of Legal Authority to Sign:	Owner
Signer's telephone number:	816. 729. 5705
Signer's mailing address:	1819 Balfimore, fue, #306, 1400 64108
If owner is an individual:	Single Married
70 1 1 1 1 1 1	

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership		Limited Liability Company
 Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	Х	Other <u>Revocable Trust</u>

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-03-005	366	\$ 88, 350. 00
\wedge		

By executing this petition, the undersigned represents and warrants that he is authorized to execute this perition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF MISSOURI) COUNTY OF JACKSON) ss

On this 31^{2+} day of August 2023, before me personally appeared Matthew Rowand to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	3154	day of August, 2023.

My Commission Expires:

DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: June 11, 2027 Commission #12354166

Notary Public Printed Name of Notary: David Johnson

Date: 8/31 ____, 2023

Name of owner: Mc Nemey Denise	M-Trustee Owner's telephone number: 913-980-3/22
Owner's address: 1819 Bq	M-Trustee Owner's telephone number: <u>913-980-3122</u> Himore Ave #30/, Kansas City. Mo 6410
IF SIGNER IS DIFFERENT FROM	J
Name of signer:	Denise McNerney
State Basis of Legal Authority to Sign:	owner
Signer's telephone number:	1819 Balfimore # 301. KCM064108
Signer's mailing address: 44	913.980.3122
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership		Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	×	Other Trust

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-03-003	366	\$ 82, 460. 00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owne

) SS

10/18____ Date: _ , 2023

STATE OF MISSOURI

COUNTY OF JACKSON

On this 18¹² day of October 2023, before me personally appeared Denise McInerry to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 18th day of October, 2023.

My Commission Expires:

DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: June 11, 2027 Commission #12354166 Notary Public Printed Name of Notary: David A. Johnson

Name of owner: MD Michaelis Revocable Trust Michael D Michaelis, Trustee

Owner's telephone number: <u>816-304-3545</u>

Owner's address: 2120 Wyandotte St Unit 1 KCMO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Michael Williams
State Basis of Legal Authority to Sign:	6 worker
Signer's telephone number:	816-304, 3545
Signer's mailing address:	2120 Myando Ho, Mutt 1, KCMO 64105
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400001001	222	\$60,610.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: September 15, 2023

Signature of person signing for owner

STATE OF Missour) ss COUNTY OF Jackson

hael Williamso On this 15 day of <u>September</u> 2023, before me appeared <u>Michael Wi</u> me personally known, who, being by me duly sworn did say that he/she/they is the <u>ower</u> of and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this

11/26/24 Misatanun Ission Expires: NOTARY PUBLIC - NOTARY SEAL STATE OF MISSOURI MY COMMISSION EXPIRES NOVEMBER 26, 2024 JACKSON COUNTY COMMISSION #12417868

emba2023. day of 2001

Printed Name of Notary: 913.219.3972

Name of owner: Meave Karlo & Bhandari Shivani Owner's telephone number: <u>602-4359227</u> Owner's address: 1904 Main St Unit 4 South Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:

State Basis of Legal Authority to Sign:

Signer's telephone number:

Signer's mailing address:

If owner is an individual:

_____ Single X___ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-21-15-00-0-04-001	378	94411

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: July 29^m, 2024

STATE OF <u>HANSAS</u>) COUNTY OF <u>JOHNSON</u>) ss

On this <u>29</u>^{*m*} day of <u>TULY</u> 2024, before me personally appeared <u>KARLO MEAUE</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _____

_____day of _____, 2024.

Notary Public Printed Name of Notary: PAUL SILVIO

My Commission Expires:

Pa	ul Ant	hony	Si	lvio
Notary	Public	State	of	Kansas
My Appt	Expires	121	n	12027

Levocable Trust-	5 7
Λ <u>C</u> . Owner's telephone number:	913908 8095
H. KCMO 64108	
OWNER:	
Megan Toal	
burer	
125 W. 18 . 14 mo 64108	1
913.908.8095	
Single Married	
ype of entity (Mark Applicable Box):	
	<u>С.</u> Owner's telephone number: t. <u>KCMO 64(08</u> <i>DWNER:</i> <u>Megan Toal</u> <u>bures</u> <u>125 W. 19^mf.142m064(08 <u>913.908.8095</u> Single Married</u>

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	x Other <u>Revocable Trust</u>

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-11-11-00-0-01-006	323	\$109,060.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: OG 18 2023

Signature of person signing for owner

STATE OF <u>Mo</u>)) ss

COUNTY OF Jackson

IAI

.......

On this <u>18</u> day of <u>October</u> 2023, before me personally appeared <u>Megan Toal</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 18^{+h} day of October , 2023.

Structure Comm. E. minission Expires: 01/12/2027

Notary Public Printed Name of Notary: Abby Price

Name of owner: Shain Meyers Owner's telephone num	mber: (402) 312-5598		
Owner's address: 535 Walnut # 402	/		
IF SIGNER IS DIFFERENT FROM OWNER:			
Name of signer: Shana Meyers			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual: Single Married			
If owner is not an individual, state what type of entity (Mark Applicable Box):			
Corporation General Partnership			
Limited Partnership Limited Liability Company			

Partnership	Urban Redevelopment Corporation	
Not-for-Profit Corporation	Other	
Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-04-009	295	40725.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

SS

STATE OF MISSOW

Date: Feb. 2028

4

COUNTY OF Jallson) ss On this 1 day of feloniam 2028, before me personally appeared <u>Shana Meyers</u> to me personally known to be the individual described in and who executed the foregoing instrument.

day of February 2023. WITNESS my hand and official seal this $\underline{\neg}$ ALBERTER PORTOPPI Notary Public pires: 01/21/2027 Printed Name of Notary:

Name of owner: Nicole Muhawi	Owner's telephone number:	503	-529-	4619
Owner's address: 1920 Wyandotte S	Street Unit 6, Kansas City,	MO. 641	08	

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Nicole Muhawi	
State Basis of Legal Authority to Sign:		
Signer's telephone number:		
Signer's mailing address:		

If owner is an individual: ______ Single ______ Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership	X	Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation		Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-25-14-00-0-01-006	177	\$63,137.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: December 1, 2023

Signature of person signing for owner

STATE OF	Mo)	
COUNTY OF	Jackson)	SS

On this _	day of	Dec	_2023, before	e me personally	appeared	Nicole,	Muhawi	
to me per	sonally kn	own to be t	he individual	described in an	nd who exec	uted the fore	going instrum	ient.

WITNESS my hand and official seal this

day of , 2023.

Notary Public Printed Name of Notary: David Johnson

My Commission Expires: DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: June 11, 2027 Commission #12354166

Name of owner: Paradis	Jo Beth		Owne	r's tele	ephone n	umber:	816-9	529-	979-	3
Owner's address:	a Jo Beth ノッンッ	Wyard	lotte	St,	Unit	#20	KC	mo	641	08
IF SIGNER IS DIFF.			VER:		•					
Name of signer:			JOB	eth	Parac	dis				
State Basis of Legal Au	thority to Sig	gn:								
Signer's telephone num	ber:									
Signer's mailing addres	s:									
If owner is an individua	1:		Sing	;le	Ma	rried				
If owner is not an indiv	idual, state w	hat type o	of entity (Mark	Applicab	le Box)				
										_

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400001002	222	\$121,600.00
29520390400003005	222	\$144,590.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Buth Paradis

Date: 560+ 22, 2023

Signature of person signing for owner

STATE OF Missouri)) ss

COUNTY OF Jackson

On this <u>22</u> day of <u>September</u> 2023, before me appeared <u>Jo Beth Para</u> me personally known, who, being by me duly sworn did say that he/she/they is the <u>owner</u> Varadis , to and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this

My Commission Expires: 11 26 24

15 /	_day of Se	ofember 20	23.
A.		1	
Notary Publi	a Tay	Dr	
Printed Nam	e of Notary:	Lisa	Taylor

LISA TAYLOR
NOTARY PUBLIC - NOTARY SEAL
STATE OF MISSOURI
MY COMMISSION EXPIRES NOVEMBER 26, 2024
JACKSON COUNTY
COMMISSION #12417868

of

Name of owner: Parr Darien	Owner's telephone number: <u>877,249.718</u>			
Owner's address: 1535 Walnut St, Unit 706, Kansas City, MO 64108				
IF SIGNER IS DIFFERENT FROM (OWNER:			
Name of signer:	Davien Parr 877, 249.7181			
State Basis of Legal Authority to Sign:	877,249.7181			
Signer's telephone number:	-			
Signer's mailing address:				
If owner is an individual:	Single Married			
If owner is not an individual, state what	type of entity (Mark Applicable Box):			
Corporation	General Partnership			
Limited Partnership	Limited Liability Company			
Partnership	Urban Redevelopment Corporation			
Not-for-Profit Corporation	Other			

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-07-004	295	\$47,248

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

STATE OF <u>Museum</u>) ss COUNTY OF <u>Januss</u>

On this <u>12</u> day of <u>124</u> 2024, before me personally appeared <u>P247</u> <u>Darien</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this <u>12</u> day of <u>Dec</u>, 2024.

My Commission Expires:IIII URI

Shorly has Stephen Notary Public Printed Name of Notary: Shirley Sof-ford

Date: 12 - 12, 2024

Name of owner: <u>Powell Wayne M-Trust</u>ee Owner's telephone number: <u>\$16-516-4065</u> Owner's address: <u>1819 Baltimore Are #201, Kansas</u> City, MO64608 IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Wayne Powell
State Basis of Legal Authority to Sign:	owner
Signer's telephone number:	816.516.4065
Signer's mailing address:	1819 Baltimore # 201. K.CMO 6410P
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
 Limited Partnership		Limited Liability Company
 Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	×	Other Trust

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-02-004	366	\$\$82,270.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above. M - M - P w l l

Signature of person signing for owner

STATE OF MISSOURI) COUNTY OF JACKSON) ss

On this $\underline{31^{5^{*}}}$ day of <u>August</u> 2023, before me personally appeared <u>Wayne Powell</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 315_____day of <u>August</u>, 2023.

My Commission Expires:

DAVID JOHNSON Notary Public - Notary Se STATE OF MISSOUR Jackson County My Commission Expires: June 11, 2027 **Commission #12354166**

Notary Public Printed Name of Notary: David Johlan

Date: 9/1,2023

Name of owner: Pyrtle Cynthia	Ow	vner's telephone number: <u>913 - 66</u>	1-0779
Owner's address: 2029 WYANDO	TE, KCM	6 APT 210, Kamsas Why.	MO. 64108
IF SIGNER IS DIFFERENT FROM O	WNER:		
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:	x'		
Signer's mailing address:			
If owner is an individual:	Single	Married	
If owner is not an individual, state what typ	e of entity (Mark	Applicable Box):	
Corporation	General	Partnership	

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other
	Limited Partnership Partnership

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-01-0-02-001	352	\$49043.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 11/30 , 2023

STATE OF Missouri) ss) COUNTY OF Jackson

On this 30^{10} day of <u>Newber</u> 2023, before me personally appeared <u>Cynthia</u> <u>PynHe</u> to me personally known to be the individual described in and who executed the foregoing instrument.

30th WITNESS my hand and official seal this day of November, 2023.

My Commission Expires: 9/18/2027

Motary Public Printed Name of Notary: <u>Alexander</u> Proffer



Name of owner: Regina Deboutez	Liv Tr Owner's telephone number: 415.533.4041
Owner's address: 2020 Wyando	stlest. 1402, Kansas City, MO. 641 08
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Regina De Boutez numer
State Basis of Legal Authority to Sign:	niner
Signer's telephone number:	415.533.7071
Signer's mailing address:	2020 Wy andolfe \$ 402, ILCNO 64108
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership		Limited Liability Company
 Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	×	Other Living Towt

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-01-0-04-009	352	\$73393.00
		x

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: 29 November, 2023

Signature/of person signing for owner

STATE OF MISSOURI COUNTY OF Jackson) ss

On this <u>30th</u> day of <u>Movember</u> 2023, before me personally appeared <u>Regime</u> <u>De Boufer</u> to me personally known to be the individual described in and who executed the foregoing instrument.

30th WITNESS my hand and official seal this day of November, 2023.

My Commission Expires: 9/18/2027

Notary Public Printed Name of Notary: <u>Alexander Proffer</u>



Name of owner: Richerson Kristi L & Ja Owner's address: 2 2218 N 36th Way Ph	oenix, AZ 85050 1250 Capr	ne number: <u>920-912-'</u> i Drive sades, CA 9027	<u>77</u> 93
<i>IF SIGNER IS DIFFERENT FROM C</i> Name of signer:		states, of losi	8
State Basis of Legal Authority to Sign:			
•			
Signer's telephone number:			
Signer's mailing address:		photos succession and	
If owner is an individual:	Single X Married		
If owner is not an individual, state what	type of entity (Mark Applicable Box	x):	
Corporation	General Partnership		
Limited Partnership	Limited Liability Company	/	
Partnership	Urban Redevelopment Cor	poration	
Not-for-Profit Corporation	Other		
			-
Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):	
29-520-12-13-00-0-01-006	366	\$78,090	
By executing this petition, the under execute this petition on behalf of the p Kristi Houghicherso Jose J. Providence Signature observes signing for owner	property owner named immediate		rized to
STATE OF)) ss COUNTY OF)			
On this day of 2024, be personally known to be the individual de	efore me personally appeared	regoing instrument.	_, to me
WITNESS my hand and official	l seal thisday of	of, 2024.	
My Commission Expires:	Notary Public	CHED CA ACUNO	WLEDGMENT

2,

Printed Name of Notary:_____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California))
County of the Hage	es)
on 12/18/2024	_ before me,Vadim Pogrebitsky, Notary Public,
Date	Here Insert Name and Title of the Officer
personally appeared	James J. Richerson
	Name(ş) of Signer(ş)
	Kristi lou Richerson

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

is true and correct.



WITNESS my hand and official seal. Signature

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph

Place Notary Seal Above

OPTIONAL -

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Title or Type of	Attached Document	on the Creation of the hoses what's Com Number of Pages: Infrovement	unund
Document Date	e:	Number of Pages:	ristrict
Signer(s) Other	Than Named Above:	1	
Capacity(ies)	Claimed by Signer(s)		
Signer's Name:		Signer's Name:	
Corporate O	ficer — Title(s):	Corporate Officer - Title(s):	
	Limited 🔲 General	🗆 Partner — 🖾 Limited 🛛 General	
	Attorney in Fact	🗆 Individual 🛛 🗆 Attorney in Fact	
	Guardian or Conservator	Trustee Guardian or Conservator	
Other:		Other:	
Signer Is Repre	senting:	Signer Is Representing:	
The processing in the processing of the processi			

©2015 National Notary Association • www.NationalNotary.org • 1-800-US NOTARY (1-800-876-6827) Item #5907

Name of owner: Ruckman Sharilyn	Owner's telephone number: 206.786.2461
Owner's address: 2120 byon	Lotte St #3 KC MO 64108
IF SIGNER IS DIFFERENT FROM OWN	NER:
Name of signer:	rarilyn Ruckman
State Basis of Legal Authority to Sign:	,
Signer's telephone number:	
Signer's mailing address:	
If owner is an individual:	Single Married
If owner is not an individual, state what type of	of entity (Mark Applicable Box):
Corporation	General Partnership

Corporation	General Partnership
 Limited Partnership	Limited Liability Company
 Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400001003	222	\$56,810.00
29520390400001004	<u>-222</u>	\$55,670.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Missouri

Date: September 22, 2023

COUNTY OF Jackson On this 22 day of <u>September</u> 2023, before me appeared <u>Showing Kuckme</u> me personally known, who, being by me duly sworn did say that he/she/they is the <u>owner</u> , to and that said instrument was signed by him/her/them on behalf of of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this

) ss

My Commission Expires: 11 26 24

mber 023.

Printed Name of Notary:

LISA TAYLOR
NOTARY PUBLIC - NOTARY SEAL
STATE OF MISSOURI
MY COMMISSION EXPIRES NOVEMBER 26, 2024
JACKSON COUNTY
COMMISSION #12417868

STATE OF

Name of owner: Scherb Cynthia			r's telephone number: <u>8/6 588/4</u> 00
Owner's address: 1904 Main	n#3	SAV KO	M664108
IF SIGNER IS DIFFERENT FROM	OWNER		
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual:	V	Single	Married
If owner is not an individual, state what	type of en	tity (Mark Aj	oplicable Box):
Corporation		General Par	tnership

Corporation	General Partnership	
Limited Partnership	Limited Liability Company	
 Partnership	Urban Redevelopment Corporation	
 Not-for-Profit Corporation	Other	

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-21-15-00-0-03-002	378	\$81,814.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: <u>215ept</u>, 2023

STATE OF <u>Mo</u> COUNTY OF Jackson) ss

On this <u>21</u> day of <u>September</u> 2023, before me personally appeared <u>Cynthia Scherb</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this $2l^{st}$ _____day of <u>september</u> 2023. Notary Public Printed Name of Notary: Aboy frice wind apires: 0//12/2027
Name of owner: Scott M Grauer Trust No	1 Owner's telephone number: $8 6-88 -8280$
Owner's address: 2120 Wyando	rte st # 21 KCMO 64(08
IF SIGNER IS DIFFERENT FROM	
Name of signer:	Scott Graner
State Basis of Legal Authority to Sign:	thosped
Signer's telephone number:	8 6.881.8280
Signer's mailing address:	2120 Wyandolfc #21, Kcm0. 64108
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation		General Partnership
Limited Partnership		Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	X	Other Trust

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400004001	222	\$95,190.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: September 15, 2023 Signature of person signing for owner STATE OF Missouri) ss COUNTY OF Jackson On this 15 day of <u>Septemble</u> 2023, before me appeared <u>Scott</u> Graues me personally known, who, being by me duly sworn did say that he/she/they is the <u>Ower</u> , to and that said instrument was signed by him/her/them on behalf of of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity. 1) 2023. WITNESS my hand and official seal this Or day of otary Public My Commission Expires: N 26.24 Printed Name of Notary: 913, 219, 3972 Lisa Taylor LISA TAYLOR NOTARY PUBLIC - NOTARY SEAL STATE OF MISSOURI MY COMMISSION EXPIRES NOVEMBER 26, 2024 JACKSON COUNTY COMMISSION #12417868

Name of owner: Shriver Rebecca		Owner's telepl	none number:	816.809	.5169
Owner's address: 1904 Main St	+ # 2 N	K(, mo)	64108		
IF SIGNER IS DIFFERENT FROM O	WNER:				
Name of signer:					
State Basis of Legal Authority to Sign:					
Signer's telephone number:					
Signer's mailing address:					
If owner is an individual:	<u> </u>	e Marr	ied		
If owner is not an individual, state what typ	e of entity (N	ark Applicable	e Box):		
Corporation	Gene	eral Partnership			

Corporation	General Partnership
Limited Partnership	Limited Liability Company
 Partnership	Urban Redevelopment Corporation
 Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-21-15-00-0-02-002	378	\$ 76,361.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Mu Smiler (owner)

Date: Sep+ 19, 2023

Signature of person signing for owner

STATE OF Missour:) COUNTY OF Jackson) ss

On this <u>14H</u>day of <u>September</u> 2023, before me personally appeared <u>Rebeau</u> Shriver to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this 19th day of September, 2023.

My Commission Expires:

12/13/2026



Wer Mr Dowell Notary Public Printed Name of Notary: Joseph McDowell

Name of owner: Simpson Renea E	
Owner's address:	pson eq mail com 1819 Baltimore 203. 1400 64100
IF SIGNER IS DIFFERENT FROM	OWNER:
Name of signer:	Jay Simpson
State Basis of Legal Authority to Sign:	oruned
Signer's telephone number:	913.638.5345
Signer's mailing address:	1819 Baltimore, 203, KCM0 64108
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-02-002	366	\$78,090.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 8-31-2023, 2023

STATE OF MISSOURI COUNTY OF JACKSON

)) ss)

On this 31st day of August 2023, before me personally appeared Jay Simpson to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

3151 day of August, 2023. ρ (

My Commission Expires:

Notary Public Printed Name of Notary: David Johnson

DAVID JOHNSON w Public - No 2027 Commission #12354166

Name of owner: Skourud Cindy	J Owner's te	elephone number: <u>913</u>	-485-5172
Owner's address: 445.00.62			104, 16cmo 64108
IF SIGNER IS DIFFERENT FROM	OWNER:		
Name of signer:	_ Cindy Skaurud		
State Basis of Legal Authority to Sign:	- Owner		
Signer's telephone number:	913.485.5172		
Signer's mailing address:	1819 Balfimore 10	4. 12CM064108	
If owner is an individual:	Single N	Aarried	
TO			

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-12-13-00-0-01-002	366 - 1819 Baltimore Ave STE 104	\$ 44,461.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

gnature of person signing for owner

Date: , 2023

STATE OF MISSOUR

COUNTY OF JACKSON

On this 2nd day of _____ 2023, before me personally appeared _____ Skaur ud to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

)

) ss)

day of October, 2023.

My Commission Expires:

Notary Public Printed Name of Notary: David Johnson

DAVID JOHNSON Notary Public - Notary Seal **STATE OF MISSOURI Jackson County** My Commission Expires: June 11, 2027 Commission #12354166

Name of owner: Swartz Martin G & Lynn F	Owner's telep	hone number: <u>816-</u>	810-4295
Owner's address: 2120 Man	14 TZ 466	7 KC MO GUI	0 9
IF SIGNER IS DIFFERENT FROM			~ ()
Name of signer:		_	
State Basis of Legal Authority to Sign:		_	
Signer's telephone number:		_	
Signer's mailing address:		-	
If owner is an individual:	Single	Married	
If owner is not an individual, state what t	ype of entity (Mark A	pplicable Box):	
	G 1D		

Cor	poration	General Partnership
Lin	nited Partnership	Limited Liability Company
Par	tnership	Urban Redevelopment Corporation
Not	-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29520390400003002	222	\$99,180.00

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

Date: _____, 2023

Signature of person signing for owner

STATE OF Missouri) ss COUNTY OF Jackson

On this 15 day of <u>September</u> 2023, before me appeared <u>Maitin Swartz</u>, to me personally known, who, being by me duly sworn did say that he/she/they is the <u>owner</u> of _______ and that said instrument was signed by him/her/them on behalf of said entity, and he/she/they acknowledged said instrument to be the free act and deed of said entity.

WITNESS my hand and official seal this _____

My Commission Expires: 11 26 24

15 aylor Printed N Vame of Notary:

	LISA TAYLOR
	NOTARY PUBLIC - NOTARY SEAL
	STATE OF MISSOURI
MY	COMMISSION EXPIRES NOVEMBER 26, 2024
	JACKSON COUNTY
	COMMISSION #12417868

Name of owner: EDDY TAV	0	Owner's telepho	one number:	113	991 4	1448
Owner's address: 1803 WYAN	DOTTE	UNIT Z	CITY , V	NO	64102	7
IF SIGNER IS DIFFERENT FROM	OWNER:	UNIT D	04			
Name of signer:						
State Basis of Legal Authority to Sign:						
Signer's telephone number:						
Signer's mailing address:						
If owner is an individual:	<u> </u>	e Marrie	d			
If owner is not an individual, state what	ype of entity (N	Mark Applicable I	Box):			
· · · ·						

Corporation	General Partnership
Limited Partnership	Limited Liability Company
 Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-11-11-00-0-02-003	302	\$52,734

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

STATE OF

Signature of person signing for owner

2025 Date: January

COUNTY OF <u>Jackson</u>) On this <u>3</u> day of <u>January</u> 2023, before me personally appeared <u>Eddy</u> <u>Javio</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

) ss

day of Janua 12/7

My Commission Expires:

July, 25,2027

Printed Name of Notary: Jasmine Brook

JASMINE BROOKS Notary Public - Notary Seal State of Missouri Commissioned for Jackson County My Commission Expires: July 25, 2027 Commission Number: 18260064

Name of owner: The Danial R Mer Dated 13/14 Owner's address: 1535 WAInc	rea Trust 0018 Owner 17 51. #308	's telephone number:	913-579.5055
IF SIGNER IS DIFFERENT FROM			
Name of signer:	Daniel Mestcal		112202
State Basis of Legal Authority to Sign:	owned		XP. O. TARY TARY AA AA AA AA AA AA AA AA AA AA AA AA AA
Signer's telephone number:	913.579. 5055		NAN SECTION
Signer's mailing address:	1535 Walnut 30	8,1000064108	
If owner is an individual:	Single	_ Married	STrink
If owner is not an individual, state what t	ype of entity (Mark Ap	plicable Box):	

Corporation		General Partnership
Limited Partnership		Limited Liability Company
Partnership		Urban Redevelopment Corporation
Not-for-Profit Corporation	X	Other Trust

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-03-003	295	\$73,950.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above. μ

Signature of person signing for owner

) ss COUNTY OF Jackson) 4 On this 7 day of Feb 202\$, before me personally appeared Danial & Merkes to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	7th	day of teb	, 2022.

My Commission Expires: 01/12/2027

Notary Public Printed Name of Notary: Abby Price

Date: Fab. 7

Name of owner: Sheila M. The	<u>Om p 501</u> Owner's telephone number: <u>816-824 - 7130</u>			
Owner's address: 2029 Wyando He St, Unit 409, KCM0 64108				
IF SIGNER IS DIFFERENT FROM OWNER:				
Name of signer:	Sheila M. Thorpson			
State Basis of Legal Authority to Sign: Owner				
Signer's telephone number:				
Signer's mailing address: <u>2029 Wyandotte St</u> , Unit 409, KC, MO 64108				
If owner is an individual: SingleX Married				
If owner is not an individual, state what type of entity (Mark Applicable Box):				
Corporation	General Partnership			
Limited Partnership Limited Liability Company				
Partnership	Urban Redevelopment Corporation			
Not-for-Profit Corporation	Other			

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-31-11-01-0-04-002	351	36,100

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

heh Man Shongson

Date: 10/4, 2023

Signature of person signing for owner

STATE OF Missouri)

) ss COUNTY OF Jackson

On this <u>4</u>^{<u>d</u>} day of <u>Both les</u> 2023, before me personally appeared <u>Shei la Marie Thompson</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this

My Commission Expires:

8/16/2027

4th day of October, 2023. Much Nubb Notary Public Printed Name of Notary: Jenna K. Grubbs



Name of owner: Troske Kaitlyn	
Owner's address: 1539 Walk	INT St. #207 18CM0 64108
IF SIGNER IS DIFFERENT FROM	
Name of signer:	Kaitlyn Trosla
State Basis of Legal Authority to Sign:	O PUBLIC
Signer's telephone number:	402.560.0728
Signer's mailing address:	4701 Wyoming St, RCIMO 400 OF MISSION
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-02-004	295	\$\$\$,237.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 2 7 0, 202 4

4

STATE OF <u>MO</u>) COUNTY OF JackSon) ss

On this 7 day of Feb	2022 , before me personally appeared _	Kaitly	in Toske
	the individual described in and who exec		

WITNESS my hand and official seal this	7th	day of _	Feb	_, 2023.
--	-----	----------	-----	----------

My Commission Expires: 01/12/2027

Notary Public / Printed Name of Notary: Abby Rice

Sell Ce

Name of owner: Tunnell Barry J	5	Owner's	telephone number: <u>816-721-0642</u>
Owner's address: 1535 Walnut St	Unit 10	N KCMO	64108
IF SIGNER IS DIFFERENT FROM			
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual:	Si	ingle	Married
If owner is not an individual, state what t	ype of entit	ty (Mark App	licable Box):
Comparation	1	Conoral Porta	ership

General Partnership
Limited Liability Company
Urban Redevelopment Corporation
Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-01-001	295	\$47,690.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Date: Septerb 21, 2023

Signature of person signing for owner

STATE OF ______ COUNTY OF Jackson) ss

On this <u>21</u> day of <u>September</u> 2023, before me personally appeared <u>Barry Turnel</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this ______ day of <u>september</u> 2023.

Commission Expires: 01/12/2027

" The second second second

Notary Public Printed No Printed Name of Notary: Abby Price

Name of owner: Van Trump Kevin J & Michelle R Owner's telephone number: <u>816-213-13</u>50

Owner's address: 2004 Grand Blvd Unit 201 Kansas City, MO 64108

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Michelle Van Trony
State Basis of Legal Authority to Sign:	MISSOUN
Signer's telephone number:	816-213-1350
Signer's mailing address:	P.O. Box 27606
	KC, MO 64113
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Parcel Number(s) from Exhibit B:	Assessed Value(s):
433 [2004 Grand, Unit 201]	\$190,950

By executing this petition, the undersigned represents and warrants that he/she/they is authorized to execute this petition on behalf of the property owner named immediately above.

	3	2.	\$	· MOOMPALINE	1	
Date:	1	0	and 1			2024
Dan.		\sim				Le VLa T

day of

Del. 2024.

5

Signature of person signing for owner

STATE OF WMM MISSIUM

COUNTY OF OKLEY

On this 17 day of <u>OCTOPU</u> 2024, before me personally appeared <u>Michelle Vantump</u>, to me personally known to be the individual described in and who executed the foregoing instrument.

Notary Public

Printed Name of Notary:

WITNESS my hand and official seal this _

BRITTANY WENETTE RAY Notary Public - Notary Seal STATE OF MISSOURI Jackson County *My Commission Expires June 19, 2028 ID # 24553423

) ss

My Commission Expires: 0

Name of owner: Wagner David	<u> </u>	mer's telephone nur	nber:	15-451-4098
Owner's address: 2029 WYANDOTT	E 5T-#305	KANSAS CITY	MD	64108
IF SIGNER IS DIFFERENT FROM O	WNER:			
Name of signer:				
State Basis of Legal Authority to Sign:				
Signer's telephone number:				
Signer's mailing address:				
If owner is an individual:	Single	Married		
If owner is not an individual, state what type of entity (Mark Applicable Box):				
Corporation	General	Partnership		

Corporation	Someran I an area bing
 Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):	
29-520-31-11-01-0-03-006	352	\$45, 380.00	

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

har

Date: 11-90.2023 . 2023

Signature of person signing for owner

STATE OF M) ss COUNTY OF Jakson

On this 30th day of <u>November</u> 2023, before me personally appeared <u>David Wagner</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this _____

My Commission Expires: 9/ 18/2027



Notary Public Printed Name of Notary: Alexander Proffer

day of Normber 2023.

on

EXECUTION PAGE FOR PETITION FOR THE CREATION OF THE CROSSROADS COMMUNITY IMPROVEMENT DISTRICT Name of owner: Walker Marcus B & Lusette Owner's telephone number: <u>413-228-7488</u> Owner's address: 14604 Outlook Overland Park, KS 66223 IF SIGNER IS DIFFERENT FROM OWNER: Name of signer: State Basis of Legal Authority to Sign: Lusette Walker Signer's telephone number: ourier Signer's mailing address: 113. 228. 7488 14604 Outlook If owner is an individual: Our land Parle, KS 66223 If owner is not an individual, state what type of entity (Mark Applicable Box): General Partnership Partnership Limited Liability Company Not-for-Profit Corporation Urban Redevelopment Corporation Other Tax Parcel Number(s): 29-520-35-07-00-0-01-001 Parcel Number(s) from Exhibit B: By executing this petition, the undersigned represents and warrants that he/she/they is authorized to executing this permon, the undersigned represents and warrants that he execute this petition on behalf of the property owner named immediately above. Date: 10 . 10 . 2024 STATE OF MISSING COUNTY OF JACICSU On this M day of N and M before me personally appeared M set M and M and M me personally known to be the individual described in and who executed the foregoing instrument. My Commission Expires: day of Maren 2024. July, 25, 2027 Notary Public Printed Name of Notary: Jasmine Brodics JASMINE BROOKS Notary Public - Notary Seal State of Missouri Commissioned for Jackson County My Commission Expires: July 25, 2027 Commission Number: 18260064

Name of owner: Wassergord Dale R& Diare J Owner's telephone number: <u>816-645-0682</u> Owner's address: <u>1819 Baltimore #462</u>, Kansor City, Mo 14118.

IF SIGNER IS DIFFERENT FROM OWNER:

Name of signer:	Date Wassergord
State Basis of Legal Authority to Sign:	OWLED
Signer's telephone number:	816-645.0682
Signer's mailing address:	1819 Bultimore #402, KCMO 64108
If owner is an individual:	Single Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):	
29-520-12-13-00-0-04-601	366	\$112,480.00	

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

the In

Date: 8/31, 2023

Signature of person signing for owner

STATE OF <u>MSSOUR</u>) COUNTY OF <u>JACKSO</u>N; ss

On this <u>315</u> day of <u>Aug</u>. 2023, before me personally appeared <u>Dale Wassengord</u> to me personally known to be the individual described in and who executed the foregoing instrument.

WITNESS my hand and official seal this	315+	day of	Aug.	, 2023.
	T	$\overline{)}$	0	0

My Commission Expires:

DAVID JOHNSON Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: June 11, 2027 Commission #12354166 Notary Public Printed Name of Notary: David Johnson

Name of owner: Brody Weber		Owner's telephone number: 913-219-7644
Owner's address: 2030 Grand Ave U	City, MO 64108	
IF SIGNER IS DIFFERENT FROM	OWNER:	
Name of signer:	Same	
State Basis of Legal Authority to Sign:	Same	
Signer's telephone number:	Same	
Signer's mailing address:	Same	
If owner is an individual:	Single	X Married

If owner is not an individual, state what type of entity (Mark Applicable Box):

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-520-35-08-00-0-01-004	435	\$81,147

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: SEPT 28,2023

STATE OF Missouri) COUNTY OF Lackson)

On this $\overline{\underline{28}}$ day of $\underline{\underline{September 2023}}$, before me personally appeared $\underline{\underline{Brody}}$ we be \underline{K} , to me personally known to be the individual described in and who executed the foregoing instrument.

day of Sept WITNESS my hand and official seal this

My Commission Expires: 3-28-26



Notary Public Notary: Mary Torces

Name of owner: April William		r's telephone number	r: 816-804-8828
Owner's address: <u>B35</u> Walnut Stree	et Apt à	205, 1Lansas	City. MO 64108
IF SIGNER IS DIFFERENT FROM OWN	VER:		
Name of signer:			
State Basis of Legal Authority to Sign:			
Signer's telephone number:			
Signer's mailing address:			
If owner is an individual:	Single	Married	
If owner is not an individual, state what type o	of entity (Mark Ap	oplicable Box):	
Corporation	General Par	tnership	
Limited Partnership	Limited Lia	bility Company	

Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

Tax Parcel Number(s):	Parcel Number(s) from Exhibit B:	Assessed Value(s):
29-230-29-16-00-0-02-006	295	44990.00

By executing this petition, the undersigned represents and warrants that he is authorized to execute this petition on behalf of the property owner named immediately above.

Signature of person signing for owner

Date: 07 Feb , 2023

STATE OF M°

) ss) COUNTY OF JackSon On this <u>7</u> day of <u>Feb</u> 2023, before me personally appeared <u>Appl Williams</u> to me personally known to be the individual described in and who executed the foregoing instrument.

_____day of _____, 2023. WITNESS my hand and official seal this ______ ANNI INTERNET agion Expires: 01/12/2027 Notary Public Printed Name of Notary: Abby Price

Name of owner: Wright Steven Craig Owner's telephone number: <u>90000083</u>

Owner's address: 5641 Newton St Over	land Park,	KS 66202		
IF SIGNER IS DIFFERENT FROM (OWNER:		v	
Name of signer:				
State Basis of Legal Authority to Sign:				
Signer's telephone number:				
Signer's mailing address:			·	
		กระบบสายไป และว่าเราหน้าเร็วแต่ไปกระบบรายและเปลา และนี้มีรับประเทศเห		
If owner is an individual:	\times	Single Married		
If owner is not an individual, state what	type of en	tity (Mark Applicable Bo	x):	
Corporation		General Partnership		
Limited Partnership		Limited Liability Compan	у	
Partnership		Urban Redevelopment Co	rporation	
Not-for-Profit Corporation		Other		
		-	r	
Tax Parcel Number(s):	Parcel N	umber(s) from Exhibit B:	Assessed Value(s):	
29-520-35-07-00-0-04-001	433 [2004	4 Grand, Suite 401]	\$174,990	
By executing this petition, the under	0	-	•	rized to
execute this petition on behalf of the p	oroperty o	wher named immediate	ly above.	
the st		Date:	5101.2024	
Signature of person signing for owner	_	Date:	, 2024	
STATE OF Kansons)				
STATE OF <u>Kansols</u>) COUNTY OF <u>SDLATED</u>) SS				
ST A		\sim		
On this <u>4</u> day of <u>HUQUET</u> 2024, be personally known to be the individual de		ersonally appeared STC and who executed the fo		_, to me
WITNESS my hand and official	seal this	HST day of	of August, 2024.	
		Sn 9		
·····	10	adjang V	Valdor	,
My Commission Expires: $\Im \mathcal{H} \mathcal{H}$	Ŷ	Notary Public Printed Name of N	lotary: Tiffany Wall	er
NOTARY PUBLIC State			<u> </u>	
My Appt. Exp.	26 26			

Corporation	General Partnership
Limited Partnership	Limited Liability Company
Partnership	Urban Redevelopment Corporation
Not-for-Profit Corporation	Other

04 Grand, Suite 401]	\$174,990
	04 Grand, Suite 401]