

1.) CORPORATION NAME:

**SOUTHERN GRAPHIC SYSTEMS, INC.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**KY**

DUE DATE: **1/31/2012**

SCC ID NO: **F0314742**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	18,000
PREFER	750

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 626 W MAIN ST  
STE 500

CITY/ST/ZIP: LOUISVILLE, KY 40202-

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: H R BAUGHMAN  
TITLE: PRESIDENT  
ADDRESS: 626 W MAIN ST  
STE 500  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-

OFFICER

DIRECTOR

NAME: LUCA C NACCARATO  
TITLE: EXECUTIVE VP  
ADDRESS: 626 W MAIN ST  
STE 500  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-

OFFICER

DIRECTOR

NAME: BENJAMIN F HARMON  
TITLE: SECRETARY  
ADDRESS: 626 WEST MAIN ST  
STE 500  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-

OFFICER

DIRECTOR

NAME: JIM DAHMUS  
TITLE: CFO  
ADDRESS: 626 W MAIN ST  
STE 500  
CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-

OFFICER

DIRECTOR

NAME: JOHN CIVANTOS TITLE: DIRECTOR ADDRESS: 626 WEST MAIN STREET SUITE 500 CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TOM HAMMOND TITLE: DIRECTOR ADDRESS: 626 WEST MAIN STREET SUITE 500 CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: RICHARD LEONG TITLE: DIRECTOR ADDRESS: 626 WEST MAIN STREET SUITE 500 CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOE SILVESTRI TITLE: DIRECTOR ADDRESS: 626 WEST MAIN STREET SUITE 500 CITY/ST/ZIP/CO: LOUISVILLE, KY 40202-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ JIM DAHMUS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JIM DAHMUS, CFO PRINTED NAME AND CORPORATE TITLE	12/5/2011 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		