

1.) CORPORATION NAME:

Michael Brady Inc.

DUE DATE: **2/28/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER
1111 E MAIN ST 16TH FL**

SCC ID NO: **F1282724**

RICHMOND, VA

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 500,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 299 N WEISGARBER ROAD

CITY/ST/ZIP: KNOXVILLE, TN 37919

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: | LOUIS J CORTINA | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 299 N WEISGARBER ROAD | | |
| CITY/ST/ZIP/CO: | KNOXVILLE, TN 37919 | | |

| | | | |
|-----------------|---------------------|---|--|
| NAME: | CHARLES M GRANT | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | SR VP | | |
| ADDRESS: | 299 N WEISGARBER RD | | |
| CITY/ST/ZIP/CO: | KNOXVILLE, TN 37919 | | |

| | | | |
|-----------------|---------------------|---|--|
| NAME: | MICHAEL G BRADY | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | CEO | | |
| ADDRESS: | 299 N WEISGARBER RD | | |
| CITY/ST/ZIP/CO: | KNOXVILLE, TN 37919 | | |

| | | | |
|-----------------|-----------------------|---|--|
| NAME: | MICHAEL E JETT | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | VICE PRESIDENT | | |
| ADDRESS: | 299 N WEISGARBER ROAD | | |
| CITY/ST/ZIP/CO: | KNOXVILLE, TN 37919 | | |

| | | | |
|-----------------|-----------------------|----------------------------------|--|
| NAME: | JOHN H HULTS | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 299 N WEISGARBER ROAD | | |
| CITY/ST/ZIP/CO: | KNOXVILLE, TN 37919 | | |

| | | | |
|-----------------|-----------------------|----------------------------------|--|
| NAME: | SCOTT MALENOCK | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 299 N WEISGARBER ROAD | | |
| CITY/ST/ZIP/CO: | KNOXVILLE, TN 37919 | | |

| | | | |
|--|---|----------------------------------|--|
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | JOHN S PATTESON DIRECTOR 299 N WEISGARBER ROAD KNOXVILLE, TN 37919 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | BRIAN D. PIERCE DIRECTOR 299 N WEISGARBER ROAD KNOXVILLE, TN 37919 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | CHARLES H POWELL DIRECTOR 299 N WEISGARBER ROAD KNOXVILLE, TN 37919 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | WILLIAM B STEVERSON DIRECTOR 299 N WEISGARBER ROAD KNOXVILLE, TN 37919 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | MARVIN I TITLOW DIRECTOR 299 N WEISGARBER ROAD KNOXVILLE, TN 37919 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | RYAN GERKEN DIRECTOR 299 N. Weisgarber Road Knoxville, TN 37919 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO: | WILLIAM N. DEAL DIRECTOR 299 N Weisgarber Road Knoxville, TN 37919 | <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/ LOUIS J CORTINA SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | LOUIS J CORTINA, PRESIDENT PRINTED NAME AND CORPORATE TITLE | 11/12/2013 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. | | | |