

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000003091

**Entity Name:** SIGNATURE GRAPHICS, INC

**Current Principal Place of Business:**

1000 SIGNATURE DRIVE  
PORTER, IN 46304

**Current Mailing Address:**

1000 SIGNATURE DRIVE  
PORTER, IN 46304

**FEI Number: 36-4297699**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT, CEO  
Name GUSE, TIMOTHY  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

Title VICE PRESIDENT  
Name MASON, DAVID  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

Title CHAIRMAN  
Name GODFREY, PAUL  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

Title VICE PRESIDENT  
Name WITAKER, STEVEN  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

Title ASSISTANT SECRETARY  
Name SCHATZMAN, JENNIFER L  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

Title ASSISTANT SECRETARY  
Name JONES, KATHLEEN M  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

Title DIRECTOR  
Name WALKER, JOHN  
Address 1000 SIGNATURE DRIVE  
City-State-Zip: PORTER IN 46304

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: KATHLEEN M. JONES**

**ASSISTANT SECRETARY 04/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date