

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010451

FILED  
Mar 23, 2012  
Secretary of State

**Entity Name:** MADE BY US, INCORPORATED

**Current Principal Place of Business:**

1000 WEST THARPE STEET  
SUITE 15  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

1000 WEST THARPE STEET  
SUITE 15  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 45-3760509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PENGELLEY, IVANNA REBECCA  
1879 GINA DRIVE  
TALLAHASSEE, FL 32303 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** FAIR, THOMAS  
**Address:** 2389 SANDPIPER STREET  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** CFO  
**Name:** GRAHAM, KEYONIA  
**Address:** 1879 GINA DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** COO  
**Name:** FAIR, JOHN  
**Address:** 2389 SANDPIPER STREET  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** S  
**Name:** PENGELLEY, IVANNA REBECCA  
**Address:** 1879 GINA DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32303

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** IVANNA REBECCA PENGELLEY

S

03/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date