2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000821

Entity Name: BLUESCOPE BUILDINGS NORTH AMERICA, INC.

Current Principal Place of Business:

1540 GENESSEE STREET KANSAS CITY, MO 64102

Current Mailing Address:

PO BOX 419917

KANSAS CITY. MO 64141

FEI Number: 51-0413911 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Name

Electronic Signature of Registered Agent

Date

FILED Feb 23, 2015

Secretary of State

CC1856861495

Officer/Director Detail:

DAN, KUMM

Title PRES, DIRECTOR Title PRESIDENT, VARCO PRUDEN

BUILDINGS

VΡ

Address 1540 GENESSEE STREET

Name HASLEBACHER, CHUCK

Address 1540 GENESSEE STREET

Address 1540 GENESSEE STREET

City-State-Zip: KANSAS CITY MO 64102

City-State-Zip: KANSAS CITY MO 64102

Title DIRECTOR Title

Name LANGE, DOUG Name ANDERSON, MORRIE

Address 1540 GENESSEE STREET

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City-State-Zip: KANSAS CITY MO 64102

ty-State-Zip: KANSAS CITY MO 64102 City-State-Zip: KANSAS CITY MO 64102

Title ASST. SECRETARY Title T

Name RICHARDSON, RYAN Name DERKSEN, GREG

Address 1540 GENESSEE STREET Address 1540 GENESSEE STREET

City-State-Zip: KANSAS CITY MO 64102 City-State-Zip: KANSAS CITY MO 64102

Title SECRETARY Title ASST. SECRETARY
Name POWER, SEAN CMITTLE DATE TO

Address 1540 GENESSEE STREET Name SMITH, DALE T

Address 1540 GENESSEE STREET Address 1540 GENESSEE STREET

City-State-Zip: KANSAS CITY MO 64102 City-State-Zip: KANSAS CITY MO 64102

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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: RYAN RICHARDSON ASSISTANT SECRETARY 02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameKUMM, DANNameMOORE, ROBERT JAddress1540 GENESSEE STREETAddress1540 GENESSEE STREET

City-State-Zip: KANSAS CITY MO 64102 City-State-Zip: KANSAS CITY MO 64102

Title ENGINEERING OFFICER Title ENGINEERING OFFICER

Name LIEBER, JOE Name STERNECKER, DAVE

Address 1540 GENESSEE STREET Address 1540 GENESSEE STREET

City-State-Zip: KANSAS CITY MO 64102 City-State-Zip: KANSAS CITY MO 64102

Title ENGINEERING OFFICER Title PRESIDENT, BUTLER MANUFACTURING

Name VOSTER, RALPH Name GILLIGAN, TOM

Address 1540 GENESSEE STREET Address 1540 GENESSEE STREET

City-State-Zip: KANSAS CITY MO 64102 City-State-Zip: KANSAS CITY MO 64102