

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2004 08:00 AM
Secretary of State

DOCUMENT # 810989

1. Entity Name
J. M. TULL METALS COMPANY, INC.



Principal Place of Business
**2621 WEST 15TH PLACE
CHICAGO, IL 60608**

Mailing Address
**2621 WEST 15TH PLACE
CHICAGO, IL 60608**



03232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-0466720

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S.PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1000000099194
03/30/04 00003 010 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GRATZ, JAY M
STREET ADDRESS	2621 W. 15TH PLACE
CITY- ST- ZIP	CHICAGO, IL 60608
TITLE	S
NAME	DOWLING, VIRGINA M
STREET ADDRESS	2621 W. 15TH PLACE
CITY- ST- ZIP	CHICAGO, IL 60608
TITLE	PCOO
NAME	MAKAREWICZ, STEPHEN E
STREET ADDRESS	2621 WEST 15TH PLACE
CITY- ST- ZIP	CHICAGO, IL 60608
TITLE	T
NAME	ROGERS, TERENCE R
STREET ADDRESS	2621 WEST 15TH PLACE
CITY- ST- ZIP	CHICAGO, IL 60608
TITLE	ATS
NAME	NICOL, JOHN C
STREET ADDRESS	4400 PEACHTREE INDUSTRIAL BLVD
CITY- ST- ZIP	NORCROSS, GA 30071
TITLE	AS
NAME	BEAUDET, LAURIE
STREET ADDRESS	2621 WEST 15TH PLACE
CITY- ST- ZIP	CHICAGO, IL 60608

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Laurie H. Baudet

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-04

Date

Daytime Phone #