

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000178

FILED  
Feb 02, 2012  
Secretary of State

**Entity Name:** OMNISOURCE CORPORATION SOUTH

**Current Principal Place of Business:**

7575 W. JEFFERSON BLVD.  
FORT WAYNE, IN 468044131

**New Principal Place of Business:**

**Current Mailing Address:**

7575 W. JEFFERSON BLVD.  
FORT WAYNE, IN 468044131

**New Mailing Address:**

**FEI Number:** 35-0809317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: MILLETT, MARK D  
Address: 7575 W. JEFFERSON BLVD.  
City-St-Zip: FORT WAYNE, IN 46804

Title: V  
Name: TEETS., RICHARD P JR  
Address: 7575 W. JEFFERSON BLVD.  
City-St-Zip: FORT WAYNE, IN 46804

Title: VS  
Name: POINSATTE, RICHARD A  
Address: 7575 W. JEFFERSON STREET  
City-St-Zip: FORT WAYNE, IN 46804

Title: CFO  
Name: WAGLER, THERESA E  
Address: 7575 W. JEFFERSON BLVD.  
City-St-Zip: FORT WAYNE, IN 46804

Title: S  
Name: WEBER, KENT H  
Address: 7575 W. JEFFERSON BLVD.  
City-St-Zip: FORT WAYNE, IN 46804

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: KENT WEBER

SEC

02/02/2012

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

\_\_\_\_\_  
Date