

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 31, 1999 8:00 am  
Secretary of State

03-31-1999 90047 036 \*\*\*150.00

DOCUMENT # P03023

1. Corporation Name

JONES & LAUGHLIN STEEL INCORPORATED

Principal Place of Business

200 PUBLIC SQUARE  
CLEVELAND OH 44114-2308  
US

Mailing Address

200 PUBLIC SQUARE  
TAX DEPT STE 39209  
CLEVELAND OH 44114-2308  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/14/1984

4. FEI Number

75-1972001

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be  
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
HUGHE, A. W  
STREET ADDRESS  
200 PUBLIC SQUARE  
CITY-ST-ZIP  
CLEVELAND OH

TITLE ☒ DELETE

NAME  
HOAG, D.H.  
STREET ADDRESS  
200 PUBLIC SQUARE  
CITY-ST-ZIP  
CLEVELAND OH

TITLE ☐ DELETE

NAME  
KELLY, J.P.  
STREET ADDRESS  
200 PUBLIC SQUARE  
CITY-ST-ZIP  
CLEVELAND OH

TITLE ☐ DELETE

NAME  
KELLY, WILL L  
STREET ADDRESS  
200 PUBLIC SQUARE  
CITY-ST-ZIP  
CLEVELAND OH 44114-2306

TITLE ☐ DELETE

NAME  
HEDRICK, H.L. JR  
STREET ADDRESS  
200 PUBLIC SQUARE  
CITY-ST-ZIP  
CLEVELAND OH

TITLE ☐ DELETE

NAME  
SKUREK, J. C  
STREET ADDRESS  
200 PUBLIC SQUARE  
CITY-ST-ZIP  
CLEVELAND OH

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VICE PRESIDENT-DIRECTOR

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILL KELLY  
SIGNED: WILL KELLY  
RECEIVED: ASST. CONTROLLER

Date

Daytime Phone #

3-24-99 (216) 622-5053

CR2E034 (11/98)

0824306