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CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 3:14

DOCUMENT # **P24566** **(2)**

1. Corporation Name
VINCENNES STEEL CORPORATION

Principal Place of Business	Mailing Address
2007 OLIPHANT DRIVE VINCENNES IN 47591	2007 OLIPHANT DRIVE VINCENNES IN 47591

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/31/1989	3a. Date of Last Report: 05/01/1994
4. FEI Number: 35-1456951	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. Box 236
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Vincennes, IN
Zip 24 / Country 25	Zip 29 47591 / Country 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES STREET
STE - 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 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: (Typed or Printed Name of Registered Agent and Title if Officer) NOTE: Registered Agent's signature required where indicated. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE	PD	11 TITLE	PD	☒ Change ☐ Addition
12 NAME	DAY, JOSEPH P.	12 NAME	Day, Kevin P.	
13 STREET ADDRESS	2101 FORBES ROAD	13 STREET ADDRESS	2007 Oliphant Dr.	
14 CITY ST ZIP	VINCENNES IN	14 CITY ST ZIP	Vincennes, IN 47591	
21 TITLE	VD	21 TITLE		☐ Change ☐ Addition
22 NAME	WOLFSON, WILLIAM M.	22 NAME		
23 STREET ADDRESS	140 EAST 72ND ST.	23 STREET ADDRESS		
24 CITY ST ZIP	NEW YORK NY	24 CITY ST ZIP		
31 TITLE	SD	31 TITLE		☒ Change ☐ Addition
32 NAME	GORDON, STEPHEN M.	32 NAME		
33 STREET ADDRESS	1120 PARK AVE.	33 STREET ADDRESS	2305 John Dodge Rd.	
34 CITY ST ZIP	NEW YORK NY	34 CITY ST ZIP	Jackson, WY 83001	
41 TITLE	TD	41 TITLE		☒ Change ☐ Addition
42 NAME	TAIKINA, JOHN T.	42 NAME		
43 STREET ADDRESS	630 FIFTH AVENUE	43 STREET ADDRESS	360 Cindy Street	
44 CITY ST ZIP	NEW YORK NY	44 CITY ST ZIP	Old Bridge, NJ 08857	
51 TITLE	AS	51 TITLE		☐ Change ☐ Addition
52 NAME	PARRISH, TERESA G.	52 NAME		
53 STREET ADDRESS	2007 OLIPHANT DRIVE	53 STREET ADDRESS		
54 CITY ST ZIP	VINCENNES IN	54 CITY ST ZIP		
61 TITLE		61 TITLE		☐ Change ☐ Addition
62 NAME		62 NAME		
63 STREET ADDRESS		63 STREET ADDRESS		
64 CITY ST ZIP		64 CITY ST ZIP		

14. I hereby certify that the information supplied with this filing is effective and 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 11 or Block 12 if changed or added above.

SIGNATURE: Teresa G. Parrish
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Teresa G. Parrish 3-21-95 (812)882-4550
Title Daytime Phone #

0486700 FN