2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2020
Secretary of State
1009921482CC

DOCUMENT# N01000005495

Entity Name: METAL SERVICE CENTER INSTITUTE-FLORIDA, INC.

Current Principal Place of Business:

C/O JULIE PIERCE
4221 W. BOY SCOUT BLVD. SUITE 600
TAMPA, FL 33607

Current Mailing Address:

C/O JULIE PIERCE
4221 W. BOY SCOUT BLVD. SUITE 600
TAMPA, FL 33607 US

FEI Number: 16-1637687

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	ANDERSON, RUBY
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Title	SECRETARY
Name	NEWMAN, LESLIE
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Title	DIRECTOR
Name	RICHARDSON, CORDREANNE
Address	6901 EAST 6TH AVENUE
City-State-Zip:	TAMPA FL 33619

Title	DIRECTOR
Name	ROBERTS, DAN
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Title	VP
Name	CLOWER, DAN
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Title	TREASURER / CFO
Name	CARBALLO, MICHAEL
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Title	PRESIDENT / CEO
Name	PIERCE, JULIE
Address	C/O GERDAU 4221 BOY SCOUT BLVD. STE 600
City-State-Zip:	TAMPA FL 33607

Title	DIRECTOR
Name	HICKMANN, ROB
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JULIE PIERCE PRESIDENT / CEO 05/21/2020

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SMITH, MIKE
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607

Title	DIRECTOR
Name	REMSEN, MARK
Address	C/O JULIE PIERCE 4221 W. BOY SCOUT BLVD. SUITE 600
City-State-Zip:	TAMPA FL 33607