2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001658

Entity Name: EARLE M. JORGENSEN COMPANY

Current Principal Place of Business:

350 S. GRAND AVE. SUITE 5100 LOS ANGELES, CA 90071

Current Mailing Address:

350 S. GRAND AVE. SUITE 5100 LOS ANGELES, CA 90071 US

FEI Number: 65-1269024

Name and Address of Current Registered Agent:

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

Officer/Director Detail :

Oncer/Director Detail.					
	Title	DIRECTOR	Title	ASSISTANT SECRETARY	
	Name	HOFFMAN, JAMES D.	Name	SMITH, WILLIAM A. II	
	Address	350 S. GRAND AVE SUITE 5100	Address	350 S. GRAND AVE. SUITE 5100	
	City-State-Zip:	LOS ANGELES CA 90071	City-State-Zip:	LOS ANGELES CA 90071	
	Title	VP	Title	DIRECTOR	
	Name	SMITH, WILLIAM A. II	Name	LEWIS, KARLA R.	
	Address	350 S. GRAND AVE. SUITE 5100	Address	350 S. GRAND AVE. SUITE 5100	
	City-State-Zip:	LOS ANGELES CA 90071	City-State-Zip:	LOS ANGELES CA 90071	
	Title	VP, TAX	Title	VP, WESTERN REGION	
	Name	YEGHYAYAN, SILVA	Name	ROY, ROB	
			Address	10650 ALAMEDA STREET	
	City-State-Zip:	SUITE 5100 LOS ANGELES CA 90071	City-State-Zip:	LYNWOOD CA 90262	
	Title	CRETARY	Title	VP	
	Name	LEWIS, KARLA R.	Name Address	LEWIS, KARLA R.	
	Address	350 S. GRAND AVE.		350 S. GRAND AVE. SUITE 5100	
	City-State-Zip:	SUITE 5100 LOS ANGELES CA 90071	City-State-Zip:	LOS ANGELES CA 90071	

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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: KARLA R. LEWIS

VICE PRESIDENT

05/24/2020

Electronic Signature of Signing Officer/Director Detail

FILED May 24, 2020 Secretary of State 6807051655CC

Certificate of Status Desired: No

Date

Date

Officer/Director Detail Continued :

Title	CFO	Title	VP
Name	LEON, E. GILBERT JR.	Name	LEON, E. GILBERT JR.
Address	10650 ALAMEDA STREET	Address	10650 ALAMEDA STREET
City-State-Zip:	LYNWOOD CA 90262	City-State-Zip:	LYNWOOD CA 90262
Title	VP, SOUTHERN REGION	Title	VP, EASTERN REGION
Name	KING, EDWARD	Name	GHOENS, STEPHEN
Address	2060 ENTERPRISE PKWY.	Address	2200 CABOT BLVD., WEST SUITE 100
City-State-Zip:	TWINSBURG OH 44087	City-State-Zip:	LANGHORNE PA 19047
Title	C00	Title	PRESIDENT
Name	DESMOND, JAMES	Name	DESMOND, JAMES
Address	10650 ALAMEDA STREET	Address	10650 ALAMEDA STREET
City-State-Zip:	LYNWOOD CA 90262	City-State-Zip:	LYNWOOD CA 90262
Title	CEO	Title	VICE PRESIDENT OF MERCHANDISING
Name	HOFFMAN, JAMES D.		
Address	350 S. GRAND AVE.	Name	LANE, CROFFORD
0.11 01 1 7	SUITE 5100	Address	10650 ALAMEDA STREET
City-State-Zip:	LOS ANGELES CA 90071	City-State-Zip:	LYNWOOD CA 90262
Title	REGIONAL VICE PRESIDENT, MIDWEST		
Name	KLOSE, BRIAN		
Address	1900 MITCHELL BOULEVARD		

City-State-Zip: SCHAUMBURG IL 60193