

1.) CORPORATION NAME: **PHOENIX METALS COMPANY (USED IN VA BY: PHOENIXCORPORATION)** DUE DATE: **10/31/2013**
 SCC ID NO: **F1313883**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA** 5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE: **HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION: **GA**

6.) PRINCIPAL OFFICE ADDRESS:
 ADDRESS: 350 SOUTH GRAND AVENUE
 SUITE 5100
 CITY/ST/ZIP: LOS ANGELES, CA 90071

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID H. HANNAH		
TITLE: CHAIRMAN & CEO		
ADDRESS: 350 SOUTH GRAND AVENUE		
CITY/ST/ZIP/CO: SUITE 5100 LOS ANGELES, CA 90071		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: STEPHEN E. ALMOND		
TITLE: PRESIDENT		
ADDRESS: 4685 BUFORD HIGHWAY		
CITY/ST/ZIP/CO: NORCROSS, GA 30071		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: WILLIAM T. HELLSTEIN		
TITLE: CFO & ASST SEC		
ADDRESS: 4685 BUFORD HIGHWAY		
CITY/ST/ZIP/CO: NORCROSS, GA 30071		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KARLA LEWIS		
TITLE: VP & SEC		
ADDRESS: 350 SOUTH GRAND AVENUE		
CITY/ST/ZIP/CO: SUITE 5100 LOS ANGELES, CA 90071		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: R. WAYNE GRANT		
TITLE: VICE PRESIDENT		
ADDRESS: 4685 BUFORD HIGHWAY		
CITY/ST/ZIP/CO: NORCROSS, GA 30071		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SILVA YEGHYAYAN VP, TAX 350 SOUTH GRAND AVENUE SUITE 5100 LOS ANGELES, CA 90071	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BARRY EPPS VP & COO P.O. BOX 7849 CHARLOTTE, NC 28241	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGG J. MOLLINS DIRECTOR 350 SOUTH GRAND AVENUE SUITE 5100 LOS ANGELES, CA 90071	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ KARLA LEWIS	KARLA LEWIS, VP & SEC	10/1/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			