## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000006414

**Entity Name: HOWMET CORPORATION** 

**FILED** Mar 21, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1600 HARVARD AVENUE 6450 ROCKSIDE WOODS CLEVELAND, OH 44105

**BOULEVARD S** 

INDEPENDENCE, OH 44131

**Current Mailing Address: New Mailing Address:** 

1600 HARVARD AVENUE 6450 ROCKSIDE WOODS **BOULEVARD S** CLEVELAND, OH 44105

INDEPENDENCE, OH 44131

FEI Number: 13-2838093 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. 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

## **OFFICERS AND DIRECTORS:**

Title: PDIR

MITCHELL, RAYMOND Name:

6450 ROCKSIDE WOODS, BOULEVARD S Address:

City-St-Zip: INDEPENDENCE, OH 44131

Title: SEC

DABNEY, DONNA Name:

6450 ROCKSIDE WOODS, BOULEVARD S Address:

INDEPENDENCE, OH 44131 City-St-Zip:

Title: TRES

HONG, PETER Name:

6450 ROCKSIDE WOODS, BOULEVARD S Address:

City-St-Zip: INDEPENDENCE, OH 44131

Title: **VPD** 

JARRAULT, OLIVIER Name:

6450 ROCKSIDE WOODS, BOULEVARD S Address:

City-St-Zip: INDEPENDENCE, OH 44131

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: KELLY LETTMANN POA 03/21/2011