


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000000716
 1. Entity Name
 O-N MINERALS (LUTTRELL) COMPANY



Principal Place of Business Mailing Address
 486 CLINCH VALLEY RD. P O BOX 6508
 LUTTRELL, TN 37779-9414 CLEVELAND, OH 44101-1508

DO NOT WRITE IN THIS SPACE



03302006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 23-2054534 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and except the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BOLAND, JULIE A
STREET ADDRESS	1001 LAKESIDE AVE 15TH FLOOR
CITY - ST - ZIP	CLEVELAND, OH 441141151
TITLE	D
NAME	WALK, ROCHELLE F
STREET ADDRESS	1001 LAKESIDE AVE 15TH FLOOR
CITY - ST - ZIP	CLEVELAND, OH 441141151
TITLE	P
NAME	LUNDIN, MICHAEL D
STREET ADDRESS	1001 LAKESIDE AVE 15TH FLOOR
CITY - ST - ZIP	CLEVELAND, OH 441141151
TITLE	D
NAME	LUNDIN, MICHAEL D
STREET ADDRESS	1001 LAKESIDE AVE 15TH FLOOR
CITY - ST - ZIP	CLEVELAND, OH 441141151
TITLE	T
NAME	BOLAND, JULIE A
STREET ADDRESS	1001 LAKESIDE AVE 15TH FLOOR
CITY - ST - ZIP	CLEVELAND, OH 441141151
TITLE	S
NAME	WALK, ROCHELLE F
STREET ADDRESS	1001 LAKESIDE AVE 15TH FLOOR
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 05/04/06-80051-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Julie A. Boland Julie A. Boland, VP & Treasurer 4/12/06 216-861-2843

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #