2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004
Secretary of State

DOCUMENT# F03000003104

Entity Name: ALCAN ALUMINUM CORPORATION

Current Principal Place of Business:

6060 PARKLAND BLVD.
CLEVELAND, OH 44124

New Principal Place of Business:

Current Mailing Address:

6060 PARKLAND BLVD.
CLEVELAND, OH 44124

New Mailing Address:

P O BOX 94596
CLEVELAND, OH 44101

FEI Number: 41-2098321 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	FINN BROOKS, MARTHA	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:	VDAS	( ) Delete
Name:	JAIRRELS, WILLIAM H	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:	DVT	( ) Delete
Name:	BATT, GEOFFREY P	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:	S	( ) Delete
Name:	ALEY, CHARLES R	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:	AT	( ) Delete
Name:	PERSING, NANCY D	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:	AT	( ) Delete
Name:	SABELLI, ROBERT J	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VD	(X) Change ( ) Addition
Name:	JAIRRELS, WILLIAM H	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:	DVT	(X) Change ( ) Addition
Name:	LONGWORTH, JO-ANN	
Address:	6060 PARKLAND BLVD.	
City-St-Zip:	CLEVELAND, OH 44124	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT J. SABELLI AT 04/06/2004

Electronic Signature of Signing Officer or Director — Date