


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2005 8:00 am
Secretary of State

04-14-2005 90124 001 ***450.00

DOCUMENT # 850493		
1. Entity Name SIFCO HOLDINGS, INC.		

Principal Place of Business 970 E. 64TH STREET CLEVELAND, OH 44103	Mailing Address 970 E. 64TH STREET CLEVELAND, OH 44103
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66003077

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01312005 Chg-P CR2E034 (10/03)

4. FEI Number 25-1396910		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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 accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS CAPPELLO, FRANK 970 EAST 64 STREET CLEVELAND, OH 44103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, HUDSON D 970 EAST 64 STREET CLEVELAND, OH 44103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CC BELZINSKAS, REMIGIJUS 970 EAST 64 STREET CLEVELAND, OH 44103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D GOTSCHALL, JEFFREY P 970 EAST 64 STREET CLEVELAND, OH 44103 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOO Timothy V. Crean 970 E. 64th St. Cleveland, OH 44103 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Carolyn J. Buller 970 E. 64th St. Cleveland, OH 44103 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Remigijus Belzinskas 2-2-05 216-432-6297

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

ATTACHMENT
P24213

66009877

SIFCO Holdings, Inc.

Continuation sheet to 2005 Florida Annual Report

10. Additional Officers and Directors

Title	D
Name	Michael S. Lipscomb
Street Address	970 E. 64 th St.
City-St-Zip	Cleveland, OH 44103

Title	D
Name	P. Charles Miller, Jr.
Street Address	970 E. 64 th St.
City-St-Zip	Cleveland, OH 44103

Title	D
Name	Alayne L. Reitman
Street Address	970 E. 64 th St.
City-St-Zip	Cleveland, OH 44103

Title	D
Name	J. Douglas Whelan
Street Address	970 E. 64 th St.
City-St-Zip	Cleveland, OH 44103