


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 06, 2006 8:00 am
Secretary of State

09-06-2006 90050 001 *1,650.00

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
--	--

66023783



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

08082006 Chg-P CR2E034 (11/05)

4. FEI Number 25-1396910	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		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 \$550.00
Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
---	------------------------------------

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO CAPPELLO, FRANK 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	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	CDCE GOTSCHALL, JEFFREY P 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	PCOO CREAN, TIMOTHY V 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	S BULLER, CAROLYN J 970 EAST 64 STREET CLEVELAND, OH 44103 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Remigijus Belzinskas Date: 9-30-06 Daytime Phone #: 216.881.8600

ATTACHMENT

SIFCO Holdings, Inc.
Continuation sheet to 2006 Florida Annual Report

16023783
#850493

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