2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004618

Entity Name: REYNOLDS METALS EXPLORATION, INC.

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
	BROAD STE D, VA 23230	REET				
Current Mailing Address:				New Mailing Address:		
201 ISABELLA STREET PITTSBURGH, PA 15212				6603 WEST BROAD STREET RICHMOND, VA 23230		
FEI Number:	52-1598064	FEI Number Applied For()	FEI Number Not Appl	icable () Ce	rtificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and	Address of New	Registered Agent:	
C/O CT CO 1200 SOUT	DRATION SY RPORATION H PINE ISLA DN, FL 33324	I SYSTEM ND RD				
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 Cam	paign Financin	g Trust Fund Contribution ().				
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PDS () DABNEY, DON 390 PARK AVE NEW YORK, N	NUE	Title: Name: Address: City-St-Zip:	PDS (X) Cha DABNEY, DONNA C 6603 WEST BROAL RICHMOND, VA 23	O STREET	
Title: Name: Address: City-St-Zip:	V () POAD, WILLIA 201 ISABELLA PITTSBURGH,	STREET	Title: Name: Address: City-St-Zip:	TRES (X) Cha HONG, PETER TRI 6603 WEST BROAL RICHMOND, VA 23	O STREET	
Title: Name: Address: City-St-Zip:	VCFO () KLUTHE, DONA 201 ISABELLA PITTSBURGH,	STREET	Title: Name: Address: City-St-Zip:	VCFO (X) Cha KLUTHE, DONALD A 6603 WEST BROAL RICHMOND, VA 23	O STREET	
Title: Name: Address: City-St-Zip:	V (X DICKEL, RONA 201 ISABELLA PITTSBURGH,	STREET	Title: Name: Address: City-St-Zip:	() Cha	ange () Addition	
Title: Name: Address: City-St-Zip:	AS (X THUMMA, DIAN 201 ISABELLA PITTSBURGH,	STREET	Title: Name: Address: City-St-Zip:	() Cha	ange () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CRYSTAL FICKEN POA 04/24/2008