

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004229

FILED
Mar 12, 2009
Secretary of State

Entity Name: HYDRO ALUMINUM NORTH AMERICA, INC.

Current Principal Place of Business:

801 INTERNATIONAL DR.
STE. 200
LINTHICUM HEIGHTS, MD 21090

New Principal Place of Business:

Current Mailing Address:

801 INTERNATIONAL DR.
STE. 200
LINTHICUM HEIGHTS, MD 21090

New Mailing Address:

FEI Number: 35-1139550 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, STE 105
TALLAHASSEE, FL 32301 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: V () Delete
Name: BROWN, LYNN
Address: 801 INTERNATIONAL DR STE 200
City-St-Zip: LINTHICUM HEIGHTS, MD 21090

Title: T () Delete
Name: WINFIELD, FRANKIE
Address: 801 INTERNATIONAL DR., STE. 200
City-St-Zip: LINTHICUM HEIGHTS, MD 21090

Title: V () Delete
Name: HOBBS, SALLY
Address: 801 INTERNATIONAL DRIVE, STE. 200
City-St-Zip: LINTHICUM HEIGHTS, MD 21090

Title: AS () Delete
Name: ABOUD, MATT
Address: 801 INTERNATIONAL DRIVE, STE. 200
City-St-Zip: LINTHICUM HEIGHTS, MD 21090

Title: AT () Delete
Name: BRENNAN, MICHAEL
Address: 801 INTERNATIONAL DRIVE, STE. 200
City-St-Zip: LINTHICUM HEIGHTS, MD 21090

Title: S () Delete
Name: HENRICH, CAROLINE
Address: 801 INTERNATIONAL DR STE 200
City-St-Zip: LINTHICUM HEIGHTS, MD 21090

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CAROLINE HENRICH

S

03/12/2009

Electronic Signature of Signing Officer or Director

_____ Date