

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90202 011 ***150.00

DOCUMENT # P05335

1. Entity Name

ALCAN ALUMINUM CORPORATION

Principal Place of Business

**6060 PARKLAND BLVD.
 MAYFIELD HEIGHTS OH 44124
 US**

Mailing Address

**P.O. BOX 511
 WARREN OH 44482
 US**

2. Principal Place of Business

3. Mailing Address

P.O. BOX 94596

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

CLEVELAND, OH

4. FEI Number

15-0624921

Applied For

Not Applicable

Zip

Country

Zip

Country

44101-4596

5. Certificate of Status Desired ☐

**\$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 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EVANS, RICHARD B 19212 SHELBURNE ROAD SHAKER HEIGHTS OH	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT / DIRECTOR BRIAN W. STURGEON 3110 SHAKER BLVD PEPPER PIKE, OH	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CHAMBERLAND, CLAUDE 107 MORT LAKE ST. LAMBERT QU	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT / DIRECTOR GEOFFREY P. BATT 436-27 RED FAWN PATH AURORA, OH	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPD BALL, ROBERT L 323. GLENGARRY RD AURORA OH	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT / DIRECTOR KEVIN R. GREENAWALT 17400 OLD TANNERY TRAIL CHAORIN FALLS, OH	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD YOSOWITZ, SANFORD 2585 LARCHMONT DRIVE BEACHWOOD OH	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EXECUTIVE VICE-PRES / DIRECTOR EMERY P. LEBLANC 3470 RED PATH #404 MONTREAL, QUEBEC, CANADA	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP LEBLANC, EMERY P 3470 REDPATH #404 MONTREAL QU	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS JOHNSON, ROY E 4423 BARRINGTON DR YOUNGSTOWN OH	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roy E. Johnson

4/24/2001

Date

404-473-6832

Daytime Phone #

CR2E034 (10/00)