## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P35788

(9)

DOCUMENT #

1. Corporation Name RAIL MANAGEMENT AND CONSULTING CORPORATION

KAIL IV	MANAGEMENT AND CONST	ULTING CONFORMIO							
Principal Place	of Business	Mailing Address			1 100/100/100/100/100/100/100/100/100/10	- 4:: =·= // •	- · · - <del>-</del> ·		
2605 THOMA	AS DRIVE	2605 THOMAS DRIVE							
P.O. BOX 28300 P.O. BOX			BOX 28300			. <del> </del>			
PANAMA CIT	TY BEACH FL 32411	PANAMA CITY BEACH US	FL 32911			3. Date Incorporated or Qualified 3a. Date of Last Report			
					10/04/1991		03/21/19		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		<b>——</b>	Applied For Not Applicable	
21		26			63-0820793			Additional	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			<ol><li>Certificate of Status Desired</li></ol>		<b>-</b>	Required	
22		27		<del> </del>	6. Election Campaign Financing			May Be	
City & State	•	City & State			Trust Fund Contribution			d to Fees	
23	Carata	28 Zip	Coun	trv	8, This corporation has liability f	or intangible	tax under s	199.032	
Zip	Country 25	29	30	/	Florida Statutes 🔲 Y	∕es □No			
24	9. Name and Address of Curre		1991		10. Name and Address of Nev	Registered	d Agent		
	g, manio and made			B1 Name					
DIEDDEN V. CADI				82 Street A	ddress (P.O. Box Number is Not Accep	reco (P.O. Box Number is Not Acceptable)			
Durden, K. Earl 2805 Thomas Drive			l'	DE SHEELA	uuless ( .e. e.	·			
	MA CITY BEACH FL 32411			83					
FAIRM	IX OIT BEACTITE CETT		-	84 City			85 Z	(ip Code	
					rporation submits this statement for the coard of directors. I hereby accept the a	F	L		
SIGNATURE	Signature, typed or printed name of registered age	ont and title if applicable (N ND DIRECTORS	OTE Registered	Agent signature re	quired when reinstating)  ADDITIONS/CHANGES TO C	DATE		ORS IN 12	
12.	PCD OFFICERS AI	DELETE	111	TLF	SECRETARY - TREASU	REC	Change	Addition	
TITLE	DURDEN, K. EARL		1.2 NA	ME	D. 50077. HELMS				
NAME STREET ADDRESS	2805 THOMAS DRIVE		1.3 \$1	REET ADDRESS					
	PANAMA CITY BCH. FL		1.4 00	TY-ST-ZIP					
CITY+S1-ZIP TITLE	VD	☐ DELETE	2 1 Ti	TLF			☐ Change	e 🔲 Addition	
NAME	CONNOR, DONALD P.		2.2 N	AME.					
STREET ADDRESS	AAAF THANAAC DONE		2351	reei address	•				
CITY-ST-ZIP	PANAMA CITY BCH. FL		2401	TY-ST-ZIP			Change	e	
TITLE	SD	<b>₩</b> DELETE	3 1 T	ITLE			Change	; L Addition	
NAME	GRAY, UNDA-G.	•	32 N						
STREET ADDRESS	2605 THOMAS DRIVE			TREET ADDRESS					
CITY-ST-ZIP	PANAMA CITY BCH. FL			ITY - ST - ZIP			Change	e 🔲 Addition	
TITLE	-	₩ DELETE	4. 1 T				[_] ug.		
NAME	-GRAY, LINDA-6		4.2 N		}				
STREET ADDRESS				TREET ADDRESS					
CITY-ST-ZIP	PANAMA CITY BCH. FL.	☐ DELETE	, 44C 5 11	ITY - SI - ZIP			Change	e 🔲 Addition	
TITLE	D LANGO	C Detroit	52N				,		
NAME	KEESS, JAMES			TREET ADDRESS					
STREET ADDRESS				HTY-ST-ZIP	1				
CITY-ST-ZIP	GREEN BAY WI	DELETE		TITLE			☐ Chang	ge 🔲 Addition	
TITLE	D D	[] perrie		IAME					
NAME	CROWLEY, LEO N. 1700 NORTH WEBSTER O	COLIRT		STREET ADDRESS					
STREET ADDRESS	GREEN BAY WI	JOVNI		CHTY - S1 - 7IP					
CITY-ST-ZIP	ORECH DAT WI				W. C. the augmetion stated in Section	110 (17/3)(k)	Florida Sta	abites Lifurther	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 3 on an attachment with an address.

SIGNATURE:

104-230-8731