2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2005 08:00 AM
Secretary of State

DOCUMENT # P9400000: 1. Entity Name GFA RAIL SERVICES, INC.		
Principal Place of Business 4110 CENTERPOINTE DR SUITE 207 FORT MYERS, FL 33916-9424	Mailing Address 4110 CENTERPOINTE DR SUITE 207 FORT MYERS, FL 33916-9424	



DO NOT WRITE IN THIS SPACE

01122005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For S5-0459706 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

Name and Address of Current Registered Agent						
FAY, SUSAN J	_					
4110 CENTERPOI	NTE DR					
SUITE 207		•	•			
FORT MYERS, FL	33916-9424	-		- '		
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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 Signature typod or printed name of registered signition and title if applicable (NOTE Registered Agent signature required when reinstating) DATE							
		Election Campaign Financi Trust Fund Contribution	ing 🔲	\$5.00 May Be Added to Fees			
10,	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY -ST-ZIP	D FAY, GORDON H 4110 CENTERPOINTE DRIVE #207 FORT MYERS, FL 339169424				#00000185274 01/21/05-80006-023 158.75		
TITLE NAME STREET ADDRESS CITY: ST-ZIP	D FAY, SUSAN J 4110 CENTERPOINTE DRIVE #207 FORT MYERS, FL 339169424				•		
TITLE NAME STREET ADDRESS CITY ST ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							
NAME		Į.					
street address City-St-Zip		1					
12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this report or supplement freport 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 pastee 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.							