

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000546

Entity Name: ALABAMA & GULF COAST RAILWAY LLC**Current Principal Place of Business:**734 HIXON ROAD
MONROEVILLE, AL 36460**Current Mailing Address:**200 MERIDIAN CENTRE
SUITE 300
ROCHESTER, NY 14618 US**FEI Number:** 75-2714522**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Authorized Person(s) Detail :**

Title	MGR, DIRECTOR
Name	WALSH, MATTHEW
Address	20 WEST AVE
City-State-Zip:	ROCHESTER NY 14618

Title	MGR, TREASURER
Name	SAVAGE, THOMAS
Address	20 WEST AVE
City-State-Zip:	DARIEN CT 06820

Title	MGR, DIRECTOR
Name	RICOTTA, ALFRED
Address	20 WEST AVE
City-State-Zip:	DARIEN CT 06820

Title	PRESIDENT
Name	JASPER, WILLIAM A.
Address	13901 SUTTON PARK DRIVE SOUTH SUITE 150
City-State-Zip:	JACKSONVILLE FL 32224

Title	VP
Name	O'DONNELL, RICHARD
Address	200 MERIDIAN CENTRE SUITE 300
City-State-Zip:	ROCHESTER NY 14618

Title	SECRETARY
Name	FERGUS, ALLISON
Address	20 WEST AVE
City-State-Zip:	DARIEN CT 06820

Title	ASST. TREASURER
Name	GRAY, LAUREN
Address	13901 SUTTON PARK DR S SUITE 175C
City-State-Zip:	JACKSONVILLE FL 32224

Title	MANAGER, ACCOUNTING
Name	LOOMIS, RACHEL
Address	13901 SUTTON PARK DR S SUITE 175C
City-State-Zip:	JACKSONVILLE FL 32224

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RACHEL LOOMIS**ACCOUNTING MANAGER** 01/26/2017_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date