

FILE NOW. FILING FEE AFTER MARCH 1 IS \$200.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra J. Morrison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 018348

1. Corporation Name
Valdosta Southern Railroad Company

APPROVED ORIGINAL was
FILED
MAY - 1 PM 12:52
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
1603 Orrington Evanston, IL 60201
1603 Orrington Evanston, IL 60201

500001504015
-06/02/95--01004--008
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/30/51
3a. Date of Last Report 04/28/94
4. FEI Number 346407910 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. This Corporation has liability for intangible tax under § 199.035, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 City & State 28 City & State
24 City, County, Zip 29 City, County, Zip 30

9. Name and Address of Current Registered Agent
CT Corporation System
1200 S. Pine Island Road
Plantation, FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature of Registered Agent (Required) and Date of Signature (Required) Registered Agent Signature (Required when transferring)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	1/D Paul Stecko	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1603 Orrington	1.2 NAME	
STREET ADDRESS	Evanston, IL 60201	1.3 STREET ADDRESS	
CITY, ST, ZIP		1.4 CITY, ST, ZIP	
TITLE	1/D R.D. Harlow	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1603 Orrington	2.2 NAME	
STREET ADDRESS	Evanston, IL 60201	2.3 STREET ADDRESS	
CITY, ST, ZIP		2.4 CITY, ST, ZIP	
TITLE	1/D W.S. Sweeney	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1603 Orrington	3.2 NAME	
STREET ADDRESS	Evanston, IL 60201	3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE	1/D R.A. Page	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1603 Orrington	4.2 NAME	
STREET ADDRESS	Evanston, IL 60201	4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE	1/D James Faulkner	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1603 Orrington	5.2 NAME	
STREET ADDRESS	Evanston, IL 60201	5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE	5 Karl A. Stewart	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1010 Wilam St	6.2 NAME	
STREET ADDRESS	Houston, TX	6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

REMITTED BY [Signature]

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 13 or in an attachment with an address.

SIGNATURE: [Signature]
NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
James Faulkner

708-492-5713
(Tallahassee)

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayfield
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 156984

1. Corporation Name

BIG DOOR COMPANY

800001504598
-06/02/95--01037--004
***200.00 ***200.00

Principal Place of Business Mailing Address

303 E. SAN MARINO DRIVE
MIAMI BEACH, FLORIDA 33139-1107

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For
Not Applicable

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

59-0610617

5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

22 City & State

27 City & State

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DANER, JACK
303 E. SAN MARINO DRIVE
MIAMI BEACH, FLORIDA 33139

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE

(Signature) (Typed or printed name of registered agent and the representative)

(NOTE: Registered Agent signature requires officer certification)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P/S/D
NAME	JACK DANER
STREET ADDRESS	303 E. SAN MARINO DRIVE
CITY, ST, ZIP	MIAMI BEACH, FLORIDA 33139
TITLE	V
NAME	LEONETTE DANER
STREET ADDRESS	303 E. SAN MARINO DRIVE
CITY, ST, ZIP	MIAMI BEACH, FLORIDA 33139
TITLE	S/T
NAME	REBA DANER
STREET ADDRESS	303 E. SAN MARINO DRIVE
CITY, ST, ZIP	MIAMI BEACH, FLORIDA 33139
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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 in this annual report is a supplemental and if filed is true and accurate and that my signature shall have the same legal effect as if made under oath. 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 13 if changed, or on an alteration with an approval.

SIGNATURE: *Jack Daner*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 (303) 534-4010