

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 JUL 26 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 347348

1. Corporation Name

THORNTON RAILROAD CONTRACTORS, INC.

600006845596--7
-08/01/02--01013--023
***2863.50 ***2863.50

2. Principal Office Address

4850 PARETE CIRCLE N.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 9364

Suite, Apt. #, etc.

REINSTATEMENT 82-02

City & State

JACKSONVILLE, FLORIDA

City & State

JACKSONVILLE, FLORIDA

Zip

Country

32218

Zip

Country

32208-0764

4. Date Incorporated or Qualified
To Do Business in Florida

06-05-1969

5. FEI Number

59-1268365

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

LARUE D. THORNTON

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

4850 PARETE CIRCLE NORTH

Suite, Apt. #, Etc.

600006845596--7

-08/01/02--01013--022

*****8.75 *****8.75

City

JACKSONVILLE, FLORIDA

State

FL

Zip Code

32218

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Larue D. Thornton

REGISTERED AGENT MUST SIGN

Date 07/26/02

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	WILLIAM C. THORNTON JR.	4850 PARETE CIRCLE N.	JACKSONVILLE, FL. 32218
S	LARUE D. THORNTON	4850 PARETE CIRCLE N.	JACKSONVILLE, FL. 32218

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: William C. Thornton Jr. President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-26-02 904-765-0085
Date Daytime Phone #

CR2E061 (9/00)