## FILE NOW: FILING FEE IS \$61.25 PROFIT FLORIDA DEPARTMENT

NONPROFIT



CORPORATION ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS					
DOCUI 1. Corporation	MENT # 765/78	· · · · · · · · · · · · · · · · · · ·			
FLORID	g fulf Const An	ilroad Museu	in, the		
Principal Place	of Business	Mailing Address			
9. 00	BOX 355	8 P.O. BOX	355	•	
Parrish FL 34217 Parrish FL 3			4215		
Pairi	59 FL 39111	Parish The	1217	3. Date Incorporated or Qualified 9/23/9%2	3a. Date of Last Report 4/29/94
2. Principal Pla	ace of Business	2a. Mailing Address	~_	4. FEI Number	Applied For
21 Cuito Ant	# ata	26 PO. BOX 181	35	59-2261446	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	€	City & State  28 Clearunter	FL	Election Campaign Financing     Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25		30	Florida Statutes	Yes □ No
	9. Name and Address of Current	Registered Agent	04   11	10. Name and Address of New Re	egistered Agent
mike	Wassen		81 Name		
1971 Goveland Rd		82 Street Ac	et Address (P.O. Box Number is Not Acceptable)		
			83		
Polm to	Harbog FL 34683		84 City		12-1-2-0-1
			City		FL 85 Zip Code
<ol> <li>Pursuant for register</li> </ol>	to the provisions of Sections 617,0502 a red agent, or both, in the State of Florida	and 617.1508, Florida Statutes, a. Such change was authorized	the above-named corp	poration submits this statement for the purp	pose of changing its registered office introduction
<ol> <li>Pursuant i or register familiar wi</li> </ol>	red agent, or both, in the State of Florida ith, and accept the obligations of, Section	and 617.1508, Florida Statutes, a. Such change was authorized on 617.0503, Florida Statutes.	the above-named corp by the corporation's bo	poration submits this statement for the purporation of directors. I hereby accept the appo	oose of changing its registered office intrent as registered agent. I am
11. Pursuant or register familiar wi	red agent, or both, in the State of Florida ith, and accept the obligations of, Sectio	a. Such change was authorized on 617.0503, Florida Statutes.	by the corporation's bo	pard of directors. I hereby accept the appo	oose of changing its registered office intment as registered agent. I am
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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 undo eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

Dayting Priorie II

Dayting Priorie

5/29/96 8/3 357-4000 Date Daytrie Prone #