

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004717

FILED  
Jul 05, 2006  
Secretary of State

Entity Name: MOTIVEPOWER, INC.

**Current Principal Place of Business:**

1001 AIR BRAKE AVENUE  
WILMERDING, PA 15148

**New Principal Place of Business:**

**Current Mailing Address:**

1001 AIR BRAKE AVENUE  
WILMERDING, PA 15148

**New Mailing Address:**

FEI Number: 23-2872369      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: VSD ( ) Delete  
Name: GARCIA-TUNON, ALVARO  
Address: 1001 AIR BRAKE AVENUE  
City-St-Zip: WILMERDING, PA 15148

Title: VGM ( ) Delete  
Name: WARNER, MARK  
Address: 1001 AIR BRAKE AVENUE  
City-St-Zip: WILMERDING, PA 15148

Title: VAS ( ) Delete  
Name: MCCLEARY, DALE  
Address: 1001 AIR BRAKE AVENUE  
City-St-Zip: WILMERDING, PA 15148

Title: V ( ) Delete  
Name: ANDERSON, NORMAN  
Address: 1001 AIR BRAKE AVENUE  
City-St-Zip: WILMERDING, PA 15148

Title: VAS ( ) Delete  
Name: SEITZ, DAVID  
Address: 1001 AIR BRAKE AVENUE  
City-St-Zip: WILMERDING, PA 15148

Title: VT ( ) Delete  
Name: DUGAN, PATRICK  
Address: 1001 AIR BRAKE AVENUE  
City-St-Zip: WILMERDING, PA 15148

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK DUGAN

VT

07/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date