

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003565

Entity Name: ATLAS TRACKS, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

19495 SW TETON AVE.
TUALATIN, OR 97062

New Principal Place of Business:

Current Mailing Address:

19495 SW TETON AVE.
TUALATIN, OR 97062

New Mailing Address:

FEI Number: 93-0551824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: C () Delete
Name: FISHER, FLOYD
Address: 2924 VISTA BUTTE DR
City-St-Zip: LAS VEGAS, NV 89134

Title: DP () Delete
Name: FISHER, GEORGE
Address: 19495 SW TETON AVE
City-St-Zip: TUALATIN, OR 97062

Title: DS () Delete
Name: STEINKAMP, LAURA
Address: 19495 SW TETON AVE.
City-St-Zip: TUALATIN, OR 97062

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: WAGGONER, CINDY
Address: 19495 SW TETON AVE
City-St-Zip: TUALATIN, OR 97062

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: CINDY WAGGONER

OM

04/18/2006

Electronic Signature of Signing Officer or Director

Date