

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003565

Entity Name: ATLAS TRACKS, INC.

FILED  
Jan 10, 2007  
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: D (X) Delete  
Name: WAGGONER, CINDY  
Address: 19495 SW TETON AVE  
City-St-Zip: TUALATIN, OR 97062

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DS (X) Change ( ) Addition  
Name: WAGGONER, CYNTHIA  
Address: 19495 SW TETON AVE.  
City-St-Zip: TUALATIN, OR 97062

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: CYNTHIA WAGGONER

DS

01/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date