

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F26399 (8)

1. Corporation Name
RAIL SWITCHING SERVICES, INC.



Principal Place of Business Mailing Address

~~2605 THOMAS DRIVE~~
~~P.O. BOX 28300~~
~~PANAMA CITY BEACH FL 32408~~
US

~~2605 THOMAS DRIVE~~
~~P.O. BOX 28300~~
~~PANAMA CITY FL 32408-6227~~
US

3. Date Incorporated or Qualified: **03/23/1981** 3a. Date of Last Report: **04/26/1995**

4. FEI Number: **63-0806161** Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business 2a. Mailing Address

21 **1590 Phoenix Blvd.** 26 **1590 Phoenix Blvd.**
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **120** 27 **120**
City & State City & State

23 **Atlanta, GA** 28 **Atlanta, GA**
City & State City & State

24 **30349** 25 **US** 29 **30349** 30 **US**
Zip Country Zip Country

9. Name and Address of Current Registered Agent

DURDEN, MICHAEL E.
2605 THOMAS DRIVE
PANAMA CITY BEACH FL 32411

10. Name and Address of New Registered Agent

81 Name: **Prentice-Hall Corp System, Inc.**

82 Street Address (P.O. Box Number is Not Acceptable): **1201 Hays St.**

83

84 City: **Tallahassee** FL 85 Zip Code: **32301**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE: *Patricia Pizzuto* **Patricia Pizzuto Ass/Sec.** **5/21/96**
Signature, typed or printed name of registered agent, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED
D	HUSKEY, DOW	2605 THOMAS DRIVE	PANAMA CITY BEACH FL	<input checked="" type="checkbox"/>
PD	DURDEN, MICHAEL	2605 THOMAS DR	PANAMA CITY BEACH FL	<input checked="" type="checkbox"/>
SD	HAUGH, KEVIN	2605 THOMAS DRIVE	PANAMA CITY BEACH FL	<input checked="" type="checkbox"/>
D	NORTON, JOHN	277 ORCHARD RD.	NEWARK DE	<input checked="" type="checkbox"/>
D	MILLER, ORVILLE	300 WILLOW VALLEY LK DR	WILLOW STREET PA	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETED	Change	Addition
Director & Chairman	Robert A. Pritzker	225 West Washington St.	Chicago, IL 60606	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
President	John J. Vresics	1590 Phoenix Blvd., Suite 120	Atlanta, GA 30349	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Director & Treasurer	R.C. Gluth	225 West Washington St.	Chicago, IL 60606	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Secretary	Robert W. Webb	225 West Washington St.	Chicago, IL 60606	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

100001835691
-05/22/96-01119-02
***200.00

5/21/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplement annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John J. Vresics* **4/24/96** **770-996-6838**
Signature and typed or printed name of signing officer or director. Date Daytime Phone

CR2E034 (12/95)