

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90458 047 ***158.75

DOCUMENT # F94000001213

1. Entity Name

RAILWAY SYSTEMS DESIGN, INC.

Principal Place of Business

**1010 ADAMS AVE
 VALLEY FORGE CORPORATE CENTER
 AUDUBON PA 19403-2402
 US**

Mailing Address

**P.O. BOX 67100
 HARRISBURG PA 17106
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

51-0233395

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MYUNG-HAK SUNG
 STE 150, WEST LAKE CORP. CTR
 9119 CORPORATE LAKE DRIVE
 TAMPA FL 33634-6323**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **CD** ☐ Delete
 NAME **ALLEN, CHESTER L**
 STREET ADDRESS **319 CANDELIGHT DR**
 CITY-ST-ZIP **MECHANICSBURG PA 17055**

TITLE **PD** ☐ Delete
 NAME **HOFSASS, RAYMOND L**
 STREET ADDRESS **1277 ASH LANE**
 CITY-ST-ZIP **LEBANON PA 17042**

TITLE **VTD** ☐ Delete
 NAME **DIETZ, ROBERT J**
 STREET ADDRESS **207 SENATE AVE.**
 CITY-ST-ZIP **CAMP HILL PA 17011**

TITLE **AS** ☐ Delete
 NAME **SYLVIA E. WEINSTEIN**
 STREET ADDRESS **160 CHERRY LANE**
 CITY-ST-ZIP **ABBOTTS TOWN PA**

TITLE **V** ☐ Delete
 NAME **REEVES, GEORGE R**
 STREET ADDRESS **3 CROSS CREEK LANE**
 CITY-ST-ZIP **CHADDS FORD PA 19317**

TITLE **VD** ☐ Delete
 NAME **JONES, CRAIG D**
 STREET ADDRESS **570 W DEKALB PIKE APT 302**
 CITY-ST-ZIP **KING OF PRUSSIA PA 19406**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VSD** ☒ Change ☐ Addition
 NAME **JONES, CRAIG D.**
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ROBERT J. DIETZ

4/29/02

(717) 763-7211

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)