2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005059

Entity Name: FLUOR DANIEL FLORIDA RAIL, INC.

FILED Apr 16, 2007 Secretary of State

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Current Principal Place of Business:			New Principal Place of Business:	
6700 LAS (IRVING, TX	COLINAS BLVE K 75039 US			
Current Mailing Address:			New Mailing Address:	
6700 LAS COLINAS BLVD. IRVING, TX 75039 US				
FEI Number:	33-0684034	FEI Number Applied For () FEI Nur	nber Not Appli	cable () Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () STEVENS, M A 1 ENTERPRISE ALISO VIEJO, C		Title: Name: Address: City-St-Zip:	P (X) Change () Addition FAULK, J.L. 6700 LAS COLINAS BOULEVARD IRVING, TX 75039
Title: Name: Address: City-St-Zip:	CFO () STEUERT, D.M. 1 ENTERPRISE ALISO VIEJO, C.		Title: Name: Address: City-St-Zip:	CFO (X) Change () Addition STEUERT, D.M. 6700 LAS COLINAS BOULEVARD IRVING, TX 75039
Title: Name: Address: City-St-Zip:	S () FISHER, L.N. ONE ENTERPRI ALISO VIEJO, C.		Title: Name: Address: City-St-Zip:	S (X) Change () Addition FISHER, L.N. 6700 LAS COLINAS BOULEVARD IRVING, TX 75039
Title: Name: Address: City-St-Zip:	T () TSENG, MIN C. 1 ENTERPRISE ALISO VIEJO, C.		Title: Name: Address: City-St-Zip:	T (X) Change () Addition OLIVA, J.M. 6700 LAS COLINAS BOULEVARD IRVING, TX 75039
Title: Name: Address: City-St-Zip:	V () THOMAS, S A 1 ENTERPRISE ALISO VIEJO, C		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BAXTER, J.E. 6700 LAS COLINAS BOULEVARD IRVING, TX 75039
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition MATZ, P.M. 6700 LAS COLINAS BOULEVARD IRVING, TX 75039

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: L.N. FISHER S 04/16/2007