2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004247

Title:

Name:

Address: City-St-Zip:

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STONER, JR, DENNIS C

EIGHTY FOUR, PA 15330

P.O BOX 8, 1253 ROUTE 519

FILED Apr 26, 2007 Secretary of State

Entity Na	me: ATLAS RA	AILROAD CONSTRUCTION (OO.			
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business: 1253 STATE ROUTE 519 EIGHTY FOUR, PA 15330		
	8, ROUTE 519 OUR, PA 1533	0				
Current N	lailing Addres	s:	New Maili	New Mailing Address:		
P.O. BOX 8, ROUTE 519 EIGHTY FOUR, PA 15330				P.O. BOX 8 EIGHTY FOUR, PA 15330		
FEI Number	: 25-1011910	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desire	∍d (X)
Name and	l Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1200 SOU PLANTAT The above	PORATION SYS TH PINE ISLAN ION, FL 33324 a named entity se of Florida.	ID ROAD	ourpose of changing i	ts registered offi	ce or registered agent,	or both,
SIGNATUI						
Election Ca		ic Signature of Registered Ago Trust Fund Contribution ().	ent		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	STOUT, WILLIA PO BOX 8, ROU	JTE 519	Title: Name: Address: City-St-Zip:	PD (X) C STOUT, WILLIAM PO BOX 8, 1253 EIGHTY FOUR, P	ROUTE 519	
Title: Name: Address: City-St-Zip:	V () SUSKO, GREGO PO BOX RT 519 EIGHTY FOUR,)	Title: Name: Address: City-St-Zip:	V (X) C SUSKO, GREGOR PO BOX 8, 1253 EIGHTY FOUR, P	ROUTE 519	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DENNIS C. STONER, JR. ST 04/26/2007

() Change () Addition