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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **G67703** **(0)**

1. Corporation Name

IRON HORSE ENGINEERING CO., INC.

Principal Place of Business	Mailing Address
303 4TH STREET PO BOX 39 PORT ST. JOE FL 32456	303 4TH STREET PO BOX 39 PORT ST. JOE FL 32456

3. Date Incorporated or Qualified: **10/31/1983**

3a. Date of Last Report: **04/11/1995**

4. FEI Number: **59-2351928** [ ] 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. [X] Yes [ ] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent

RISH, WILLIAM J.
303 4TH STREET
PORT ST. JOE FL 33456

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	STD	[ ] DELETE	11 TITLE	[X] Change [ ] Addition
NAME	MOORHEAD, WILLIAM HENRY		12 NAME	
STREET ADDRESS	INTRACOSTAL CANAL STREET		13 STREET ADDRESS	4724 SCHOONER BLVD
CITY-ST-ZIP	OVERSTREET FL		14 CITY-ST-ZIP	SUFFOLK, VA 23435
TITLE	PD	[ ] DELETE	21 TITLE	[ ] Change [ ] Addition
NAME	MOORHEAD, ALICE G.		22 NAME	
STREET ADDRESS	INTRACOSTAL CANAL STREET		23 STREET ADDRESS	
CITY-ST-ZIP	OVERSTREET FL		24 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	31 TITLE	[ ] Change [ ] Addition
NAME	MOORHEAD, WILLIAM H.,III		32 NAME	
STREET ADDRESS	BRADLEY LANE		33 STREET ADDRESS	
CITY-ST-ZIP	RICHMOND VA		34 CITY-ST-ZIP	
TITLE	D	[ ] DELETE	41 TITLE	[ ] Change [ ] Addition
NAME	MILBURN, ANNE M		42 NAME	
STREET ADDRESS	P O BOX 5024 NA		43 STREET ADDRESS	
CITY-ST-ZIP	SUFFOLK VA		44 CITY-ST-ZIP	
TITLE		[ ] DELETE	51 TITLE	[ ] Change [ ] Addition
NAME			52 NAME	
STREET ADDRESS			53 STREET ADDRESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		[ ] DELETE	61 TITLE	[ ] Change [ ] Addition
NAME			62 NAME	
STREET ADDRESS			63 STREET ADDRESS	
CITY-ST-ZIP			64 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is true, complete and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 added above with an address.

SIGNATURE: Alice G. Moorhead / ALICE G. MOORHEAD 03-08-96 804/538-2464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #