2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# P02000104486

Entity Name: TRANSRAIL SOLUTIONS, INC.

Current Principal Place of Business:

301 W BAY ST BOX 33
SUITE 2360
JACKSONVILLE, FL 32202

New Principal Place of Business:

1650 PRUDENTIAL DRIVE
SUITE 210
JACKSONVILLE, FL 32207

Current Mailing Address:

301 W BAY ST BOX 33
STE 2360
JACKSONVILLE, FL 32202

New Mailing Address:

1650 PRUDENTIAL DRIVE
SUITE 210
JACKSONVILLE, FL 32207

FEI Number: 82-0566394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODWIN, TERRI
5506 GARDON ARBOR DR.
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

GOODWIN, TERRI
12440 FLYNN ROAD
JACKSONVILLE, FL 32223 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: TERRI GOODWIN 01/04/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: JOHNSON, PAM
Address: 301 W BAY ST STE 2360
City-St-Zip: JACKSONVILLE, FL 32202

Title: PD ( ) Delete
Name: JOHNSON, JENNIFER
Address: 301 W BAY ST STE 2360
City-St-Zip: JACKSONVILLE, FL 32202

Title: D ( ) Delete
Name: GOODWIN, RICHARD T.
Address: 5506 GARDEN ARBOR DR.
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: JOHNSON, PAM
Address: 1650 PRUDENTIAL DRIVE, SUTIE 210
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD (X) Change ( ) Addition
Name: JOHNSON, JENNIFER
Address: 1650 PRUDENTIAL DRIVE, SUITE 210
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change ( ) Addition
Name: GOODWIN, RICHARD T.
Address: 12440 FLYNN RD.
City-St-Zip: JACKSONVILLE, FL 32223

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: PAMELA C. JOHNSON CEO 01/04/2006
Electronic Signature of Signing Officer or Director Date