

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000022466

FILED
Feb 24, 2009
Secretary of State

Entity Name: DOT ALUMINUM RAIL MANUFACTURER INC

Current Principal Place of Business:

2401 CORPORATE BLVD
BROOKSVILLE, FL 34604 US

New Principal Place of Business:

Current Mailing Address:

6247 LAND O LAKES BLVD
LAND O LAKES, FL 34638 US

New Mailing Address:

FEI Number: 26-2224100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADKINS, WILLARD
6247 LAND O LAKES BLVD
LAND O LAKES, FL 34638 US

Name and Address of New Registered Agent:

WOODARD, WILLIAM
2410 CORPORATE BLVD
BRROKSVILLE, FL 34604 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: WILLIAM WOODARD

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ADKINS, WILLARD
Address: 6247 LAND O LAKES BLVD
City-St-Zip: LAND O LAKES, FL 34638 US

Title: VP (X) Delete
Name: WOODARD, WILLIAM
Address: 5400 BELLVIEW AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: ST (X) Delete
Name: LOUIS, CHRIS
Address: 1723 SUNSET DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WOODARD, WILLIAM VP
Address: 5400 BELLVIEW AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM WOODARD

VP

02/24/2009

Electronic Signature of Signing Officer or Director

Date