

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90336 041 ***150.00

DOCUMENT # P08088

1. Entity Name

RAILWORKS TRACK SYSTEMS, INC.

Principal Place of Business

**350 WEST 300 SOUTH, SUITE 101
SALT LAKE CITY UT 84101**

Mailing Address

**350 WEST 300 SOUTH, SUITE 101
SALT LAKE CITY UT 84101**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

41-1522172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **WOLFF, ROBERT**
STREET ADDRESS **350 WEST 300 SOUTH, SUITE 101**
CITY-ST-ZIP **SALT LAKE CITY UT 84101**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **LAPP, JOHN**
STREET ADDRESS **350 WEST 300 SOUTH, SUITE 101**
CITY-ST-ZIP **SALT LAKE CITY UT 84101**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☒ Delete
NAME **BRACE, SCOTT D**
STREET ADDRESS **350 WEST 300 SOUTH, SUITE 101**
CITY-ST-ZIP **SALT LAKE CITY UT 84101**

TITLE ☐ Change ☒ Addition
NAME **Exec. V.O.**
STREET ADDRESS **Kennedy Town**
CITY-ST-ZIP **6225 Smith Ave. Baltimore MD 21209**

TITLE **T** ☐ Delete
NAME **REGER, KENNETH**
STREET ADDRESS **350 WEST 300 SOUTH, SUITE 101**
CITY-ST-ZIP **SALT LAKE CITY UT 84101**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **HAASE, MARY ANN**
STREET ADDRESS **350 WEST 300 SOUTH, SUITE 101**
CITY-ST-ZIP **SALT LAKE CITY UT 84101**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☒ Delete
NAME **AZARELA, MICHAEL ROBERT**
STREET ADDRESS **6225 SMITH AVENUE, SUITE 200**
CITY-ST-ZIP **BALTIMORE MD 21209**

TITLE ☐ Change ☒ Addition
NAME **Asst. Treas**
STREET ADDRESS **Gene Collins**
CITY-ST-ZIP **One North Lexington Ave. White Plains NY 10601**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)