

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P26151

FILED
Jan 23, 2009
Secretary of State

Entity Name: CSX INTERMODAL TERMINALS, INC.

Current Principal Place of Business:

301 WEST BAY ST.
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

500 WATER STREET C160
JACKSONVILLE, F 32202

New Mailing Address:

500 WATER STREET C160
JACKSONVILLE, FL 32202

FEI Number: 59-2863367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HERTWIG, JAMES R
Address: 301 WEST BAY STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: DVP () Delete
Name: CLEMENT, WILLIAM C
Address: 301 W BAY STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: GOLDMAN, NATHAN D
Address: 500 WATER STREET C160
City-St-Zip: JACKSONVILLE, FL 32202

Title: CS () Delete
Name: AUSTIN, MARK D
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: AVP () Delete
Name: LEDOUX, ROBERT B JR
Address: 301 W BAY ST
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DAVP (X) Change () Addition
Name: WHITT, WILBY W
Address: 301 W BAY STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D (X) Change () Addition
Name: GOLDMAN, NATHAN D
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

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

Title: AVP (X) Change () Addition
Name: HOOVER, REYNOLD N
Address: 301 W BAY ST
City-St-Zip: JACKSONVILLE, FL 32202

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: MARK D. AUSTIN

CS

01/23/2009

Electronic Signature of Signing Officer or Director

Date