

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30105

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** LORAM MAINTENANCE OF WAY, INC.

**Current Principal Place of Business:**

3900 ARROWHEAD DRIVE  
HAMEL, MN 553409529 US

**New Principal Place of Business:**

**Current Mailing Address:**

3900 ARROWHEAD DRIVE  
P O BOX 188  
HAMEL, MN 553409529 US

**New Mailing Address:**

3900 ARROWHEAD DRIVE  
HAMEL, MN 553409529 US

**FEI Number:** 41-0950401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 EAST PARK AVE  
TALLAHASSEE, FL 32301 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: DIR  
Name: AMUNDRUD, J K  
Address: 102 8TH AVENUE SW  
City-St-Zip: CALGARY, AB T2P 1B3 CN

Title: DIR  
Name: MANNIX, R N  
Address: 102 8TH AVENUE SW  
City-St-Zip: CALGARY, AB T2P 1B3 CN

Title: VCFO  
Name: CHERREY, D D  
Address: 3900 ARROWHEAD DRIVE  
City-St-Zip: HAMEL, MN 553409529 US

Title: DIR  
Name: WILSON, P V  
Address: 3900 ARROWHEAD DRIVE  
City-St-Zip: HAMEL, MN 553409529 US

Title: PCEO  
Name: HOMAN, P J  
Address: 3900 ARROWHEAD DRIVE  
City-St-Zip: HAMEL, MN 553409529 US

Title: DIR  
Name: HOMAN, P J  
Address: 3900 ARROWHEAD DRIVE  
City-St-Zip: HAMEL, MN 553409529 US

I hereby 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 all other like empowered.

SIGNATURE: D. D. CHERREY

VCFO

04/28/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date