

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90300 014 ***150.00

DOCUMENT # P35788

1. Entity Name
RAIL MANAGEMENT CORPORATION



Principal Place of Business

2605 THOMAS DRIVE

~~P.O. BOX 28300~~

PANAMA CITY BEACH FL 32411

Mailing Address

2605 THOMAS DRIVE

~~P.O. BOX 28300~~

PANAMA CITY BEACH FL 32411

US

2. Principal Place of Business

2605 THOMAS DR

Suite, Apt. #, etc.

3. Mailing Address

2605 THOMAS DR

Suite, Apt. #, etc.

City & State

PANAMA CITY BEACH FL

City & State

PANAMA CITY BEACH FL

Zip

Country

32408

FL

Zip

Country

32408

FL

4. FEI Number

63-0820793

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DURDEN, K. EARL

2605 THOMAS DRIVE

PANAMA CITY BEACH FL 32411

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **COB** ☐ Delete
NAME **DURDEN, K. EARL**
STREET ADDRESS **2605 THOMAS DRIVE**
CITY-ST-ZIP **PANAMA CITY BCH. FL**

TITLE **VCOB** ☐ Delete
NAME **CONNOR, DONALD P.**
STREET ADDRESS **2605 THOMAS DRIVE**
CITY-ST-ZIP **PANAMA CITY BCH. FL**

TITLE **VPT** ☐ Delete
NAME **HELMS, D SCOTT**
STREET ADDRESS **2605 THOMAS DRIVE**
CITY-ST-ZIP **PANAMA CITY BCH. FL**

TITLE **PCOB** ☐ Delete
NAME **DURDEN, MICHAEL E**
STREET ADDRESS **2605 THOMAS DR**
CITY-ST-ZIP **PANAMA CITY BEACH FL**

TITLE **D** ☒ Delete
NAME **CROWLEY, LEO N.**
STREET ADDRESS **1700 NORTH WEBSTER COURT**
CITY-ST-ZIP **GREEN BAY WI**

TITLE **D** ☐ Delete
NAME **HUSKEY, D**
STREET ADDRESS **112 W ADAMS ST**
CITY-ST-ZIP **DOTHAN AL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **COB/D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VCOB/D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE **PCOB/D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SECRETARY** ☐ Change ☒ Addition
NAME **BARRY L. PARKER**
STREET ADDRESS **2605 THOMAS DR**
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

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

12. 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 10 or Block 11 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

4/21/03

Date

850-230-8331

Daytime Phone #

CR2E034 (10/02)