


FILED

08 MAY 29 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F07000006342			
1. Entity Name FECR RAIL CORP.			
Principal Place of Business 7411 FULLERTON STREET STE 300 JACKSONVILLE, FL 32256		Mailing Address 7411 FULLERTON STREET STE 300 JACKSONVILLE, FL 32256	
2. Principal Place of Business c/o FLG LLC 1345 6 th AVE NY, NY 10105 USA		3. Mailing Address c/o FLG LLC 1345 6 th AVE. NY, NY 10105 USA	
4. FEI Number 41-2262258		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent Name: CT Corporation System Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road City: Plantation FL Zip Code: 33324	
<p>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 actions of registered agent.</p> <p>SIGNATURE: <i>Sean McDermott</i> Sean McDermott, Customer Specialist DATE: 4/16/08</p> <p><small>NOTE: Registered Agent signature required when requested.</small></p>			
<p>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</p>		<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DCEO EDENS, WESLEY R 1345 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10105 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DCEO NARDONE, RANDAL A 1345 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10105 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DP ADAMS, JOSEPH JR 1345 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10105 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	CFOT NAUGHTON, KEVIN 1345 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10105 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	V NICHOLSON, KEN 1345 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10105 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S BROOKS, DAVID N 1345 AVENUE OF THE AMERICAS 46TH FLOOR NEW YORK, NY 10105 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<p>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</p>			
SIGNATURE: <i>[Signature]</i>		Date: 4/16/08 2127986100	

KS