

1.) CORPORATION NAME:

**RailWorks Corporation**

DUE DATE: **6/30/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CTR  
1111 E MAIN ST 16TH FL**

SCC ID NO: **F1865627**

**RICHMOND, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000,000
PREFER	2,500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5 PENN PLAZA 15TH FLOOR

CITY/ST/ZIP: NEW YORK, NY 10001

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	JEFFREY M LEVY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME:	NATHAN A BROWN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME:	JOHN AUGUST	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EXEC VP		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME:	GENE CELLINI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP-TAX		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME:	BENJAMIN D LEVY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EX VP/GC/S		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME:	VERONICA LUBATKLIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EX VP/CFO		
ADDRESS:	5 PENN PLAZA		
CITY/ST/ZIP/CO:	NEW YORK, NY 10001		

NAME: ROBERT CUMMINGS TITLE: DIRECTOR ADDRESS: 5 PENN PLAZA CITY/ST/ZIP/CO: NEW YORK, NY 10001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KENNETH ISAACS TITLE: DIRECTOR ADDRESS: 5 PENN PLAZA CITY/ST/ZIP/CO: NEW YORK, NY 10001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GREGORY MULDOON TITLE: DIRECTOR ADDRESS: 5 PENN PLAZA CITY/ST/ZIP/CO: NEW YORK, NY 10001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN C YOUNG TITLE: EX VP ADDRESS: 5 Penn Plaza CITY/ST/ZIP/CO: New York, NY 10001	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ GENE CELLINI	GENE CELLINI, VP-TAX	6/5/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		