

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jul 05, 2005 8:00 am**  
**Secretary of State**

07-05-2005 90095 011 \*\*\*\*55.00

DOCUMENT # L0000Q006597

1. Entity Name  
 INTERNATIONAL BARGE AND EQUIPMENT COMPANY, LLC



Principal Place of Business  
 385 RIVERBEND ROAD  
 SHELBYVILLE, TN 37160

Mailing Address  
 385 RIVERBEND ROAD  
 SHELBYVILLE, TN 37160

20061340



06292005 No Chg-LLC CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 58-2549896	Applied For Not Applicable
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5. Certificate of Status Desired  **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, RICHARD K  
 501 WEST BAY STREET  
 JACKSONVILLE, FL 32202

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MVP GSTOHL, KENNETH E 7320 ST. RD. 13 N. ST. AUGUSTINE, FL 32092
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MST STALTSMAN, JOHN B JR. 5569 KNOB ROAD NASHVILLE, TN 37209
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MP THORNTON, G.E. 115 MIDDLETON CIRCLE NASHVILLE, TN 37215
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MCFO NEWTON, ROBERT R 385 RIVERBEND ROAD SHELBYVILLE, TN 37160
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Robert R Newton* *Robert R Newton* 6-29-05 931-684-5055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #