## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## DOCUMENT # L05000012457

1. Entity Name

T & T TRANSPORT L.L.C.



**FILED** May 08, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

P.O. BOX 21238

DO NOT WRITE IN THIS SPACE

TALLAHASSSEE, FL 32316-1238

P.O. BOX 21238 TALLAHASSSEE, FL 32316-1238



04122007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
20-2326742	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**BUSH, ANTONIO** 

## DO NOT WRITE

5-1-07

Daytime Phone #

CRAWFORDVILLE, FL 32327		IN THIS SPACE
	Catour Bush	tered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
Fi	Sgnalure, typed of printed ที่คำห์ด อี registered agent and title if applicable. (NOTE: Regis liting Fee is \$50.00 ue by May 1, 2007	U00000762420 05/29/07-80007-014 50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGRM  BUSH, ANTONIO  107 STATEN RD  CRAWFORDVILLE, FL 32327	
THILE NAME STREET ADDRESS CITY-ST-ZIP THILE		
NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
indicated	certify that the information supplied with this filling does not qualify for the on this report is true and accurate and that my signature shall have the billity company or the receiver or trustee empowered to execute this report.	exemptions contained in Chapter 119, Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am a managing member or manager of the rt as required by Chapter 608. Florida Statutes