

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2008 08:00 A
Secretary of State

DOCUMENT # L05000057039

1. Entity Name
 CALOOSA TRANSPORT, LLC



Principal Place of Business 5500 FLAGHOLE ROAD CLEWISTON, FL 33440	Mailing Address 5500 FLAGHOLE ROAD CLEWISTON, FL 33440
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DO NOT WRITE IN THIS SPACE



02152008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2976290	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RIEF, FRANK J III
 442 WEST KENNEDY BLVD., SUITE 340
 TAMPA, FL 33606

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)

000000831971
 04/15/08-80002-005 138.75

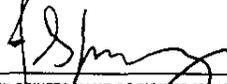
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SPRY, JAMES P 5500 FLAGHOLE ROAD CLEWISTON, FL 33440
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. 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 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:  _____ Date _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DAYTON Phone #

863-983-5111