

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034789

Entity Name: INDIAN RIVER MARINE TRANSPORTATION LLC

FILED
May 02, 2008
Secretary of State

Current Principal Place of Business:

2605 ST. LUCIE BLVD.
FORT PIERCE, FL 34945

New Principal Place of Business:

2605 ST. LUCIE BLVD.
FORT PIERCE, FL 34946

Current Mailing Address:

2605 ST. LUCIE BLVD.
FORT PIERCE, FL 34945

New Mailing Address:

2605 ST. LUCIE BLVD.
FORT PIERCE, FL 34946

FEI Number: 20-4631174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LAWTON, TIMOTHY D
2605 ST. LUCIE BLVD.
FORT PIERCE, FL 34945 US

Name and Address of New Registered Agent:

LAWTON, TIMOTHY D
2605 ST. LUCIE BLVD.
FORT PIERCE, FL 34946 US

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.

SIGNATURE:

05/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAWTON, TIMOTHY D
Address: 2605 ST. LUCIE BLVD.
City-St-Zip: FORT PIERCE, FL 34945

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LAWTON, TIMOTHY D
Address: 2605 ST. LUCIE BLVD.
City-St-Zip: FORT PIERCE, FL 34946

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: TIMOTHY D. LAWTON

MGRM

05/02/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date