

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # M00000001779

1. Entity Name
SOH TRANSPORTATION, LLC



Principal Place of Business
1250 YORK STREET
HANOVER, PA 17331

Mailing Address
1250 YORK STREET
HANOVER, PA 17331

DO NOT WRITE IN THIS SPACE



04222005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
23-3023448

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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 May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	VPST
NAME	GOOD, CHARLES E
STREET ADDRESS	1250 YORK ST
CITY - ST - ZIP	HANOVER, PA 17331
TITLE	P
NAME	WAREHIME, MICHAEL A
STREET ADDRESS	1250 YORK ST
CITY - ST - ZIP	HANOVER, PA 17331
TITLE	AT
NAME	GRIM, SEAN
STREET ADDRESS	1250 YORK ST
CITY - ST - ZIP	HANOVER, PA 17331
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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04/25/05-80114-010 50.00

**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:

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

Date

Daytime Phone #

4/22/05 7176324477