

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000663

FILED
May 10, 2005
Secretary of State

Entity Name: INTERMODAL TRANSFER, LLC

Current Principal Place of Business:

1691 PHOENIX BLVD., SUITE 110
ATLANTA, GA 30349

New Principal Place of Business:

Current Mailing Address:

1691 PHOENIX BLVD., SUITE 110
ATLANTA, GA 30349

New Mailing Address:

FEI Number: 68-0360592 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:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: GLUTH, R.C.
Address: 225 W. WASHINGTON ST.
City-St-Zip: CHICAGO, IL 60606

Title: VD () Delete
Name: BENJAMIN, TIMOTHY
Address: 1691 PHOENIX BLVD STE 110
City-St-Zip: ATLANTA, GA 30349

Title: VD () Delete
Name: ROSS, BOBBY
Address: 1691 PHOENIX BLVD STE 110
City-St-Zip: ATLANTA, GA 30349

Title: S () Delete
Name: WEBB, ROBERT
Address: 225 W WASHINGTON ST
City-St-Zip: CHICAGO, IL 60606

Title: D () Delete
Name: FISCHL, KENNETH
Address: 111 W JACKSON BLVD
City-St-Zip: CHICAGO, IL 60604

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 BENJAMIN

VD

05/10/2005

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