

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000663

FILED
Apr 30, 2009
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 ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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/MANAGERS:

Title: MGRM () Delete
Name: GLUTH, R.C.
Address: 181 WEST MADISON ST., 26FLOOR
City-St-Zip: CHICAGO, IL 60602

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: 181 WEST MADISON ST., 26FLOOR
City-St-Zip: CHICAGO, IL 60602

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 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 BENJAMIN

VD

04/30/2009

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