2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2005
Secretary of State

DOCUMENT# M03000003891

Entity Name: FIRST TRANSIT TRANSPORTATION LLC

Current Principal Place of Business:

705 CENTRAL AVE. SUITE 300
CINCINNATI, OH 45202

New Principal Place of Business:

Current Mailing Address:

705 CENTRAL AVE. SUITE 300
CINCINNATI, OH 45202

New Mailing Address:

FEI Number: 20-0298491 **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/MEMBERS:

Title: MGR ( ) Delete
Name: CLAIR, RICHARD C
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: MGR ( ) Delete
Name: MURRAY, MICHAEL C
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: MGR ( ) Delete
Name: BALLARD, BRUCE
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: MGR ( ) Delete
Name: CELEBREZZE, MICHAEL
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: MGR ( ) Delete
Name: DUNNING, RICK
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: MGR ( ) Delete
Name: PROMPONAS, NICK
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MURRAY, MICHAEL C
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

Title: MGR (X) Change ( ) Addition
Name: BEECHEM, BRIAN
Address: 705 CENTRAL AVE. SUITE 300
City-St-Zip: CINCINNATI, OH 45202

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: BRIAN BEECHEM MGR 04/20/2005

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