

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # M04000000333

1. Entity Name
BENNETT TRUCK TRANSPORT, LLC



Principal Place of Business
1001 INDUSTRIAL PKWY
MCDONOUGH, GA 30253

Mailing Address
1001 INDUSTRIAL PKWY
MCDONOUGH, GA 30253

FILED
Jul 29, 2005 08:00 AM
Secretary of State



07122005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2427579

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOSS, MARVIN
20801 BISCAYNE BLVD STE. 506
NORTH MIAMI BEACH, FL 33180-1430

**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

N/A

(NOTE: Registered Agent signature required when reinstalling)

DATE _____

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LOWRY, DANNY 1001 INDUSTRIAL PKWY MCDONOUGH, GA 30253
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BARRETT, CHRISTOPHER 1001 INDUSTRIAL PKWY MCDONOUGH, GA 30253
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000374963
07/29/05-80006-003 55.00

**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)(f), 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: Christopher Barrett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

800-866-500 X 751

7/14/05