

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000089

FILED
May 01, 2008
Secretary of State

Entity Name: IRVING OIL TRANSPORTATION COMPANY LLC

Current Principal Place of Business:

U.S. LEGAL AFFAIRS, 190 COMMERCE WAY
PORTSMOUTH, NH 03801

New Principal Place of Business:

190 COMMERCE WAY
PORTSMOUTH, NH 03801

Current Mailing Address:

U.S. LEGAL AFFAIRS, 190 COMMERCE WAY
PORTSMOUTH, NH 03801

New Mailing Address:

190 COMMERCE WAY
ATTN: U.S. LEGAL AFFAIRS
PORTSMOUTH, NH 03801

FEI Number: 52-2224192 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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: IRVING, KENNETH
Address: 10 SYDNEY STREET
City-St-Zip: ST. JOHN, NEW BRUNSWICK CANAD, E2L 4K1

Title: MGR () Delete
Name: ALVINO, TIMOTHY
Address: 340 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10173

Title: MGR () Delete
Name: WELLS, OWEN W
Address: P.O. BOX 426
City-St-Zip: PORTLAND, ME 042110426

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: IRVING, KENNETH
Address: 10 SYDNEY STREET
City-St-Zip: ST. JOHN, NB E2L 4K1 CN

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: OWEN W. WELLS

MGR

05/01/2008

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