

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001813

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: TRANSPORTATION LOGISTICS COMPANY, LLC

**Current Principal Place of Business:**

1015 A STREET  
TACOMA, WA 98402

**New Principal Place of Business:**

**Current Mailing Address:**

1015 A STREET  
TACOMA, WA 98402

**New Mailing Address:**

FEI Number: 26-1852032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**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: WHEELER, NOEL  
Address: 10539 PROFESSIONAL CIRCLE, SUITE 200  
City-St-Zip: RENO, NV 89521

Title: MGR ( ) Delete  
Name: CURTISS, MARK  
Address: 1015 A STREET  
City-St-Zip: TACOMA, WA 98402

Title: MGR ( ) Delete  
Name: DEFEBAUGH, JAMES E  
Address: 1015 A STREET  
City-St-Zip: TACOMA, WA 98402

Title: MGR (X) Delete  
Name: GAFFORD, DERREK L  
Address: 1015 A STREET  
City-St-Zip: TACOMA, WA 98402

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WHEELER, NOEL  
Address: 1015 A STREET  
City-St-Zip: TACOMA, WA 98402

Title: MGR (X) Change ( ) Addition  
Name: GAFFORD, DERREK  
Address: 1015 A STREET  
City-St-Zip: TACOMA, WA 98402

Title: MGR (X) Change ( ) Addition  
Name: DEFEBAUGH, JIM  
Address: 1015 A STREET  
City-St-Zip: TACOMA, WA 98402

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: JANE LOUIS

POA

03/28/2009

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