


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 05, 2005 08:00 AM
Secretary of State

DOCUMENT # M97000000121 1. Entity Name TRANSUS INTERMODAL, L.L.C.	
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Principal Place of Business 112 KROG STREET SUITE 10 ATLANTA, GA 30307 US	Mailing Address 112 KROG STREET SUITE 10 ATLANTA, GA 30307 US
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DO NOT WRITE IN THIS SPACE

06302005No Chg-LLC CR2E083 (10/03)

4. FEI Number 58-2289483	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WINSHIP, BLANTON C 112 KROG ST STE 10 ATLANTA, GA 303072486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PRESSLEY, JAMES Z JR. 112 KROG ST STE 10 ATLANTA, GA 303072486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MALLORY, W. NEELY III 4294 SWINNEA ROAD MEMPHIS, TN 38118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TRANSUS, INC. 112 KROG ST STE 10 ATLANTA, GA 303072486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

UN00011370612
07/05/05-80022-023 \$0.00

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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: *W. Neely III* *6/30/05* *404-624-5531*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

W. Neely III, Manager