



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b)(c)) is subject to a penalty fee of \$25.00.

1. ID No. 102644		2. Exact name of the limited liability company TCH, LLC			
3. State of Formation UTAH		4. Brief description of the character of the business which is actually conducted in Rhode Island Establishing, owning, operating & otherwise dealing with a truckstop credit clearinghouse			
5. Principal office address 1104 COUNTRY HILLS DRIVE		City OGDEN	State UTAH	Zip 84403	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name EVA JANE C. MARSH		Contact Title ADMINISTRATIVE ASSISTANT / LEGAL DEPARTMENT			
Street Address 1104 COUNTRY HILLS DRIVE		City OGDEN	State UTAH	Zip 84403	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name TED D. JONES		Manager Name KARL J. KELLEY			
Street Address 1104 COUNTRY HILLS DRIVE		Street Address 1104 COUNTRY HILLS DRIVE			
City OGDEN	State UTAH	Zip 84403	City OGDEN	State UTAH	Zip 84403
Manager Name CLARK G. GESSEL		Manager Name			
Street Address 1104 COUNTRY HILLS DRIVE		Street Address			
City OGDEN	State UTAH	Zip 84403	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11					

CORPORATION SERVICE COMPANY
222 JEFFERSON BOULEVARD, SUITE 200
WARWICK, RHODE ISLAND 02888

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

102644

File Date	<u>10-5-09</u>
Check No.	<u>7511531</u>
By:	<u>MNC</u>
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Ted D. Jones 09/18/2009
Signature of Authorized Person Date
TED D. JONES / PRESIDENT & MANAGER
Print or Type Name of Authorized Person