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TRAVELCENTERS OF AMERICA LLC

Form 3

January 31, 2007

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement TRAVELCENTERS OF AMERICA LLC [AMEX: TA] LOMBARDI MICHAEL J (Month/Day/Year) 01/31/2007 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O HOSPITALITY (Check all applicable) PROPERTIES TRUST, 400 CENTRE STREET 10% Owner Director (Street) _X__ Officer Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) **EVP** of Sales _X_ Form filed by One Reporting Person NEWTON. MAÂ 02458 Form filed by More than One

(City) (State) (Zip) **Table I - Non-Derivative Securities Beneficially Owned**1. Title of Security 2. Amount of Securities 3. 4. Nature of Indirect Beneficial

1.Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned (Instr. 4)

3. 4. Nature of In
Ownership
Form: (Instr. 5)
Direct (D)
or Indirect

Â

Reporting Person

Common Shares 0 D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

(I) (Instr. 5)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

2. Date Exercisable and 3. Title and Amount of 6. Nature of Indirect 1. Title of Derivative Security 4. 5. **Expiration Date** Securities Underlying Ownership Beneficial Ownership (Instr. 4) Conversion (Month/Day/Year) Derivative Security or Exercise Form of (Instr. 5) (Instr. 4) Price of Derivative Derivative Security:

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Date Expiration Title Amount or Security Direct (D)

Exercisable Date Number of or Indirect

Shares (I)

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

LOMBARDI MICHAEL J

C/O HOSPITALITY PROPERTIES TRUST 400 CENTRE STREET

NEWTON, MAÂ 02458

Signatures

/s/ Michael J.
Lombardi

**Signature of Reporting Person

O1/29/2007

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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