SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Peters David A			2. Date of Event Requiring Staten Month/Day/Year 05/27/2005	nent 🔤	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>TransMontaigne Partners L.P.</u> [ TLP ]						
(Last) 1670 BROAI	Last) (First) (Middle) 1670 BROADWAY				4. Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Own		(N		5. If Amendment, Date of Original Filed (Month/Day/Year)		
SUITE 3100						Officer (give title below)	Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) DENVER	CO	80202									y One Reporting Person y More than One erson
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Securit		y (Instr. 4) Conve or Exe		ersion ercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	Title	9	Amount or Number of Shares	Price o Derivat Securit	tive	Direct (D) or Indirect (I) (Instr. 5)	
Explanation of F	Responses:										

**Remarks:** 

David A. Peters is a Director of TransMontaigne GP L.L.C., the general partner of the Issuer.

No securities are beneficially owned.

/s/ David A. Peters

\*\* Signature of Reporting Person

06/01/2005

Date

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

\* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.