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Mar 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000000123 (9)

1. Corporation Name
RAYONIER INC.

Principal Place of Business
1177 SUMMER STREET
STAMFORD CT 06905-5529
US

Mailing Address
1177 SUMMER STREET
STAMFORD CT 06905-5522
US



2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

25

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

30

3. Date Incorporated or Qualified
01/10/1994

3a. Date of Last Report
05/01/1996

4. FEI Number
13-2607329

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
ARASKOG, RAND V
1330 AVENUE OF THE AMERICAS
NEW YORK NY
PD
GROSS, RONALD M
1177 SUMMER STREET
STAMFORD CT
D
ORTEGA, KATHERINE D
1140 23RD STREET, N.W. #508
WASHINGTON DC
V
NUTTER, W L
1177 SUMMER STREET
STAMFORD CT
V
BERRY, WILLIAM S
1177 SUMMER STREET
STAMFORD CT
V
O'BRIEN, KEVIN S
1177 SUMMER STREET
STAMFORD CT

☐ DELETE

☐ DELETE

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☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

CHAIRMAN AND CHIEF EXECUTIVE OFFICER ☒ Change ☐ Addition

PRESIDENT AND CHIEF OPERATING OFFICER ☒ Change ☐ Addition

EXECUTIVE VICE PRESIDENT ☐ Change ☐ Addition

☒ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MACDONALD AUGUSTE

3/12/97

203-248-7000

CR2E034 (9/96)