FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 JUL -5 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **840961** (7)

1. Corporation Name
ROCKY CREEK LOGGING COMPANY, INC.

Principal Place of Business
C/O TAX DEPARTMENT
1600 VALLEY ROAD
WAYNE NJ 07470-2043

Mailing Address
C/O TAX DEPARTMENT
1600 VALLEY ROAD
WAYNE NJ 07470-2043

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/27/1978
3a. Date of Last Report: 07/06/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: 22-1973851 — 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
CORRIGAN, JOHN F.
920 BARNETT BANK BUILDING
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent
01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City — FL — 05 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

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	REED, J M	1.2 NAME	
STREET ADDRESS	915 OLETANGY RD	1.3 STREET ADDRESS	
CITY, ST, ZIP	FRANKLIN LKS, NJ 00000	1.4 CITY, ST, ZIP	
TITLE	T	2.1 TITLE	☐ Change ☐ Addition
NAME	BARNEY, D. W.	2.2 NAME	
STREET ADDRESS	1600 VALLEY RD.	2.3 STREET ADDRESS	
CITY, ST, ZIP	WAYNE, NJ 0	2.4 CITY, ST, ZIP	
TITLE	AT	3.1 TITLE	☐ Change ☐ Addition
NAME	SHUMATE, E H	3.2 NAME	
STREET ADDRESS	8 STILLWOOD CIR SO	3.3 STREET ADDRESS	
CITY, ST, ZIP	SAVANNAH, GA 00000	3.4 CITY, ST, ZIP	
TITLE	VP	4.1 TITLE	☐ Change ☐ Addition
NAME	TYSON, J.S.	4.2 NAME	
STREET ADDRESS	200 JENSON ROAD	4.3 STREET ADDRESS	
CITY, ST, ZIP	PRATTVILLE AL	4.4 CITY, ST, ZIP	
TITLE	P	5.1 TITLE	☐ Change ☐ Addition
NAME	FENDIG, JAMES G	5.2 NAME	
STREET ADDRESS	4 SAVY LN	5.3 STREET ADDRESS	
CITY, ST, ZIP	SAVANNAH GA	5.4 CITY, ST, ZIP	
TITLE	VP	6.1 TITLE	☐ Change ☐ Addition
NAME	REED, J M	6.2 NAME	
STREET ADDRESS	1600 VALLEY RD	6.3 STREET ADDRESS	
CITY, ST, ZIP	WAYNE NJ	6.4 CITY, ST, ZIP	

14. I hereby certify that the information contained with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information contained 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 is an attachment with an address.

SIGNATURE: D.W. BARNEY — 6/30/95 — (201) 628-2210
SIGNATURE AND TYPED OR PRINTED NAME OF AUTHORIZED OFFICER OR DIRECTOR — Date — Daytime Phone

0384745 FP