FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (8)WEYERHAEUSER REAL ESTATE COMPANY Principal Place of Business Mailing Address 33650 SIXTH AVE. SO. 33650 SIXTH AVE. SO. FEDERAL WAY WA 98003 FEDERAL WAY WA 98003 3. Date Incorporated or Qualified 3a. Date of Last Report 08/07/1979 04/25/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 91-0861867 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Γ Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 [1] 28 Trust Fund Contribution Added to Fees Zip Country Zιρ Country 8. This corporation has liability for intangible tax under s 199,032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 82 1201 HAYES STREET SUITE 105 83 TALLAHASSEE FL 32301 City 84 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, typed or printed name of registered a profund title if applicable (NOT): Angistured Agent signature required when reinstating) 12 CR2E034 (12/95) OFFICERS AND DIFFECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THILE DELFTE 1 1 TITLE Change Add tion NAME NITTA, JEFFREY 1.2 NAME STREET ADDRESS 33650 6TH AVE. S. 1.3 STREET ADDRESS FEDERAL WAY, WA 00000 CITY-ST-ZIP 1.4 CITY - ST- ZIP TITLE DELETE 2 1 TITLE ☐ Change Addition NAME MCDADE, SANDY STREET ADDRESS 33650 6TH AVE. S. 2.3 STREET ADDRESS FEDERAL WAY, WA 00000 CITY-S1-ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3 1 TITLE Change Addition NAME LEWIS, C. STEPHEN 3.2 NAME STREET ADDRESS 33650 6TH AVE. S. 3.3. STREET ADDRESS FEDERAL WAY, WA 00000 CITY-ST-ZIP 3.4 CITY-S1-ZIP TITLE VC DELETE 4. 1 TITLE Addition ☐ Change HILLYARD, STEVEN J NAME 4.2 NAME 33650 6TH AVE. S. STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP FEDERAL WAY, WA 00000 4.4 CITY-ST-ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY - ST - ZIP 5.4 CrTY+ST-ZiP TITLE DELETE 6-1 TOLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - 7IP 14. Ido hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/z/95 206-924-342