# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 03, 2008 08:00 A**
**Secretary of State**

DOCUMENT # 843860

1. Entity Name
WEYERHAEUSER REAL ESTATE COMPANY

| Principal Place of Business | Mailing Address |
|---|---|
| 33940 WEYERHAEUSER WAY<br>EC3-3B8<br>FEDERAL WAY, WA 98001 | PO BOX 9777<br>EC3-3B8<br>FEDERAL WAY, WA 98063 |

DO NOT WRITE IN THIS SPACE

02252008 No Chg-P CR2E034 (11/05)

4. FEI Number
91-0861867

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR, SUITE 4
WESTON, FL 33331

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2008 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000244996
03/13/08-80021-014 150.00

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | VT |
| NAME | NITTA, JEFFREY |
| STREET ADDRESS | 33940 WEYERHAEUSER WAY S EC3-3B8 |
| CITY-ST-ZIP | FEDERAL WAY, WA 98001 |
| TITLE | S |
| NAME | GRACE, CLAIRE S |
| STREET ADDRESS | 33940 WEYERHAEUSER WAY S. EC3-3B8 |
| CITY-ST-ZIP | FEDERAL WAY, WA 98001 |
| TITLE | VC |
| NAME | BANWART, MYRON J |
| STREET ADDRESS | 33940 WEYERHAEUSER WAY S. EC3-3B8 |
| CITY-ST-ZIP | FEDERAL WAY, WA 98001 |
| TITLE | P |
| NAME | FULTON, DANIEL S |
| STREET ADDRESS | 33940 WEYERHAUESER WAY S EC3-388 |
| CITY-ST-ZIP | FEDERAL WAY, WA 98001 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Myron Banwart 2/24/08 (253)924-3753
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #