2008, LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DO NOT WRITE IN THIS SPACE

DOCUMENT # B9300000112

Entity Name
BUCKEYE FLORIDA, LIMITED PARTNERSHIP



SECRETARY OF STATE DIVISION OF CORPORATIONS

08 JUN 18 AM 8: 56

Principal Place of Business ONE BUCKEYE DRIVE PERRY, FL 32347-9512

Mailing Address ATTN: LEGAL DEPT. 1001 TILLMAN STREET MEMPHIS, TN 38112-2096



01112008 No Chg-LP

CR2E003 (12/06)

4. FE) Number 59-3161530

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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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. 06/19/08--01035--018 **1366.25 SIGNATURE Signature, typed or printed name of registered signat and title if applicable. FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner, 12. GENERAL PARTNER INFORMATION F93000000388 DOCUMENT # NAME **BUCKEYE FLORIDA CORPORATION** STREET ADDRESS 1001 TILLMAN ST CITY-ST-ZIP MEMPHIS, TN 38108 DOCUMENT # B. Tacket JUN 18 2008 NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT A NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

CHECK HERE

NAME STREET ADDRESS CITY-ST-ZIP

Ument Secretary of its

2/15/08 (901) 320-8409

SIGNATURES AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNET CENERAL PARTNET, Buckeye Florida Corporation

Sheila Jordan Cunningham