

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90446 001 ***300.00

DOCUMENT # F93000000388

1. Entity Name
BUCKEYE FLORIDA CORPORATION

Principal Place of Business
**STATE ROAD 30, ROUTE 3, BOX 260
 PERRY FL 32347**

Mailing Address
**1001 TILLMAN STR
 PO BOX 8407
 MEMPHIS TN 38108
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3200093**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

Name

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

n/k/a, Corporation Service Company

City

FL

Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **PD FERRARO, D B**
 STREET ADDRESS **1001 TILLMAN STREET**
 CITY-ST-ZIP **MEMPHIS TN 38112**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **CD CANNON, R E**
 STREET ADDRESS **1001 TILLMAN STR**
 CITY-ST-ZIP **MEMPHIS TN**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VP WHITCOMB, D H**
 STREET ADDRESS **1001 TILLMAN STREET**
 CITY-ST-ZIP **MEMPHIS TN**

TITLE Change Addition
 NAME **VPD Gayle L. Powelson**
 STREET ADDRESS **1001 Tillman Street**
 CITY-ST-ZIP **Memphis, Tn. 38112**

TITLE Delete
 NAME **VP DOGGRELL, HENRY P**
 STREET ADDRESS **1001 TILLMAN ST**
 CITY-ST-ZIP **MEMPHIS TN**

TITLE Change Addition
 NAME **VPD**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **S CUNNINGHAM, SHEILA JORDAN**
 STREET ADDRESS **1001 TILLMAN STREET**
 CITY-ST-ZIP **MEMPHIS TN 38108**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **VPD Elizabeth J. Welter**
 STREET ADDRESS **1001 Tillman Street**
 CITY-ST-ZIP **Memphis, Tn. 38112**

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sheila Jordan Cunningham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/01

Date

(901) 320-8409

Daytime Phone #

Sheila Jordan Cunningham, Secretary

CR2E034 (10/00)