2002 UNIFORM BUSINESS REPORT (UBR)

Feb 24, 2002 8:00 am F96000005107 DOCUMENT # Secretary of State 1. Entity Name 02-24-2002 90065 014 ***158 PRUDENTIAL TIMBER INVESTMENTS, INC. Principal Place of Business Mailing Address FOUR COPLEY PLACE 6TH FL PO BOX 990407 80031187 **BOSTON MA 02116 BOSTON MA 02199** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 04-3070429 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name. CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 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 Signature_typed or printed name of registered agent and title if applicable. 한국부표를 가는 발표한 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 31.5 12. 11. PETER R. ECKERT Change PD · ☐ Delete TITLE TITLE NAME NAME LORD, JOHN M JR 5- ANITA DRIVER STREET ADDRESS STREET ADDRESS 109 CHESTNUT STREET CITY-ST-ZIP EAST HANOVERIGINS CITY-ST-ZIP WESTON MA 02193 TREASURER Addition Change TITLE ☐ Delete TITLE C. EDWARD CHAPLIN NAME NAME CHARLES, DOUGLAS W 35 HILLCREST AUE STREET ADDRESS STREET ADDRESS 131 PARK DRIVE # 9 SUMMIT, NJ 07901 CITY-ST-ZIP CITY-ST-ZIP **BOSTON MA 02215** AS . ASSISTANT COMPTROLLER Addition ☐ Delete TITLE TOTLE NAME BARRY BEERS NAME SHEA, JAMES 2625 Abbey Ridge Road STREET ADDRESS STREET ADDRESS 7 WENANOH AVE convers GA 30094 CITY-ST-ZIP CITY-ST-ZIP ROCKAWAY NJ 07866 ☐ Change ☐ Addition TITLE ☐ Delete TITLE CD NAME NAME WINOGRAD, BERNARD STREET ADDRESS STREET ADDRESS 189 OAK RIDGE AVE CITY-ST-ZIP CITY-ST-ZIP SUMMIT NJ 07901 Addition ☐ Change Delete TITLE TITLE ÁS NAME NAME SHULEVITZ, DEBORAH G STREET ADDRESS STREET ADDRESS 924 W END AVE CITY-ST-7IP CITY-ST-ZIP **NEW YORK NY** ☐ Change ☐ Addition WAR AS ☐ Delete TITLE TITLE **BLUM, FREDERICK W** NAME NAME STREET ADDRESS **8 AGAWAM AVE** STREET ADDRESS CITY-ST-ZIP

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. tralence W. Blum (Frederick W. Blum) SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-7IP

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