2000 UNIFORM BUSINESS REPORT (UBR) Apr 18, 2000 8:00 am Secretary of State DOCUMENT # F9900005754 ST. JOE TIMBERLAND COMPANY OF DELAWARE 04-18-2000 90267 048 ***150.00 Principal Place of Business Mailing Address PRUDENTIAL DRIVE. SUITE 400 1650 PRIIDENTIAL DRIVE, SUITE 400-C0065306 JACKSONVILLE FL 32207-8166 `#S∩#### FL 32207 3. Mailing Address 1650 Prudential 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number APPLIED FOR 59.3607 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 220 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PAINE, LAWRENCE Street Address (P.O. Box Number is Not Acceptable) 1650 PRUDENTIAL DRIVE, SUITE 400 JACKSONVILLE FL 32207 Zip Code FI 8. The above namerical in submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 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 11. OFFICERS AND DIRECTORS 12. Change **X** Addition Delete TITLE TITLE AS JONES, J. MALCOLM JR. NAME Lawrence Paine 1650 PRUDENTIAL DRIVE, SUITE 400 STREET ADDRESS STREET ADDRESS 1650 Prudential Drive, #400 CITY-ST-ZIP JACKSONVILLE FL 32207 CITY-ST-ZIP Jacksonville, FL 32207 Change ☐ Addition TITLE ☐ Delete regan, Michael N NAME NAME 1650 PRUDENTIAL DRIVE, SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32207 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE RHODES, ROBERT M NAME NAME 1650 PRUDENTIAL DRIVE, SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JACKSONVILLE FL 32207 Change ☐ Addition ☐ Delete TITLE TITLE BAYER, MICHAEL F NAME NAME 1650 PRUDENTIAL DRIVE, SUITE 400 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32207 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE SMALLWOOD, H. CLAY NAME NAME 1650 PRUDENTIAL DRIVE, SUITE 400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32207 ☐ Delete TITLE ☐ Change Addition TITLE

blied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information sup indicated on this report or supplemental of the corporation or the receiver or thus changed, or on an attachment Rit ress, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

HARRIS, JEFFREY W

JACKSONVILLE FL 32207

1650 PRUDENTIAL DRIVE, SUITE 400

SIGNATURE: Lawrence Paine, Assistant Secreta Signature and typed on Printed Name of Signing officer on Direct Control of Signature and Typed on Printed Name of Signing Officer on Direct Control of Signature and Typed on Printed Name of Signing Officer on Direct Control of Signature and Typed on Printed Name of Signing Officer on Direct Control of Signature and Typed Officer on

CIA (SMI)