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May 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **G15694** (4)  
1. Corporation Name  
**DEERFIELD TIMBER INVESTORS, INC.**



Principal Place of Business  
**111 WEST 50TH STREET  
NEW YORK NY 10020**

Mailing Address  
**111 WEST 50TH STREET  
NEW YORK NY 10020-1202**

3. Date Incorporated or Qualified  
**12/28/1982** 3a. Date of Last Report  
**04/29/1996**

2. Principal Place of Business  
21 **10 East 87th Street**  
Suite, Apt. #, etc.  
22 **4th Floor**  
City & State  
23 **New York, NY**  
Zip Country  
24 **10128** 25  
2a. Mailing Address  
26 **10 East 87th Street**  
Suite, Apt. #, etc.  
27 **Attn: Jerome A. Siegel**  
City & State  
28 **New York, NY**  
Zip Country  
29 **10128** 30

4. FEI Number  
**13-3356082** Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00** May Be  
Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent  
**HENDERSON, J. GROVER  
726 OWENS ROAD  
YULEE FL 32097**  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SMITH, EARL</b>	1.2 NAME	
STREET ADDRESS	<b>1000 OSBORNE ST.</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST. MARYS GA</b>	1.4 CITY-ST-ZIP	
TITLE	P	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>DAVIS, WILLIAM H.</b>	2.2 NAME	<b>Tilden Norris</b>
STREET ADDRESS	<b>100 OSBORNE ST.</b>	2.3 STREET ADDRESS	<b>1000 Osborne Street</b>
CITY-ST-ZIP	<b>ST. MARYS GA</b>	2.4 CITY-ST-ZIP	<b>St. Mary's, GA 31558</b>
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>GILMAN, HOWARD</b>	3.2 NAME	<b>Bernard D. Bergreen</b>
STREET ADDRESS	<b>111 WEST 50TH STREET</b>	3.3 STREET ADDRESS	<b>111 West 50th Street</b>
CITY-ST-ZIP	<b>NEW YORK NY</b>	3.4 CITY-ST-ZIP	<b>New York, N.Y. 10020</b>
TITLE	AS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SORRENTINO, DOMINICK</b>	4.2 NAME	
STREET ADDRESS	<b>1000 OSBORNE STREET</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST. MARYS GA</b>	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>FAIELLA, JOHN</b>	5.2 NAME	<b>Jerome A. Siegel</b>
STREET ADDRESS	<b>111 W. 50TH ST.</b>	5.3 STREET ADDRESS	<b>10 East 87th Street</b>
CITY-ST-ZIP	<b>NEW YORK, NY.</b>	5.4 CITY-ST-ZIP	<b>New York, N.Y. 10128</b>
TITLE	C	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PALLEW, MICHAEL</b>	6.2 NAME	
STREET ADDRESS	<b>1000 OSBORNE ST</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ST MARYS GA</b>	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jerome A. Siegel* 4/25/97 712-410-7555

CR2E034 (9/96)