2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 06, 2001 8:00 am Secretary of State **DOCUMENT # H34863** 1. Entity Name GREAT SOUTH TIMBER, INC. 02-06-2001 90044 015 ***150.00 Principal Place of Business Mailing Address 925 EAST BAYA AVENUE 925 EAST BAYA AVENUE P O BOX 2249 P O ROX 2249 811536 LAKE CITY FL 30256 LAKE CITY FL 30256 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2473255 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NORRIS, JOHN E Street Address (P.O. Box Number is Not Acceptable) 201 N. MARION ST. SUITE 301 LAKE CITY FL 32055 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 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. DC TITLE Delete ☐ Change COOK, WILLIAM K. NAME NAME Gillmore, Frank D. STREET ADDRESS P. O. BOX 87 N/A STREET ADDRESS 4404 Bluewater Dr. CITY-ST-7IP CALLAHAN FL 32011 CITY-ST-ZIP Panama City, Fl 32404 TITLE ■ Delete ☐ Change BRYANT, PAUL R. NAME NAME STREET ADDRESS P O BOX 954 N/A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TRENTON FL 32693 DAST-TITLE Defete TITLE ~ ☐ Changē Addition NAME COLEMAN, JAMES M. NAME STREET ADDRESS P.O. 30X 87 N/A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CALLAHAN FL 32011 DP ☐ Delete TITLE ☐ Change Addition STERN, ROLAND T NAME NAME STREET ADDRESS RT 5 BOX 7364 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STARKE FL 32091

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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

DST

Cook, Robert P

51 S Margaret St.

Lake_City, F1 32025

DVP

COOK, ROBERT P

51 S MARGARET ST

LAKE CITY FL 32025

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIE

CR2E034 (10/

Change

☐ Change

X Addition

Addition