2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K09466

FILED Apr 21, 2007 Secretary of State

Entity Name: SOUTHERN FORESTRY CONSULTANTS, INC.

Current Principal Place of Business: New Principal Place of Business: C/O MICHAEL J. DOONER 105 W. ANDERSON STREET MONTICELLO, FL 32344 **New Mailing Address: Current Mailing Address:** 305 W. SHOTWELL ST. 305 W. SHOTWELL ST BAINBRIDGE, GA 31717 US BAINBRIDGE, GA 39819 US FEI Number: 59-2864028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOONER, MICHAEL J 414 LIVE OAK LANE HAVANA, FL 32333 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MCGLINCY, JOSEPH A Name: Name: 2578 LAKE DOUGLAS ROAD Address: Address: City-St-Zip: BAINBRIDGE, GA 39819 US City-St-Zip: Title: DP Title: () Delete () Change () Addition DOONER, MICHAEL J Name: Name: 404 LIVE OAK LANE Address: Address: HAVANA, FL 32333 US City-St-Zip: City-St-Zip: Title: Title: DVP () Delete () Change () Addition LEWIS, DAVID S Name: Name: RT. 3 BOX 127-G Address: Address: City-St-Zip: MONTICELLO, FL 32344 US City-St-Zip: Title: DT () Delete Title: DT (X) Change () Addition WILLIAMS, JEFFREY B EMMONS, ALAN W Name: Name: Address: 5319 SHELLFIELD ROAD Address: 282 ALLEN PHILLIPS ROAD City-St-Zip: City-St-Zip: ENTERPRISE, AL 36330 US CLIMAX, GA 39834-266 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHANIEL G. HOLLEMAN MGR 04/21/2007