

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006831

FILED
Apr 19, 2006
Secretary of State

Entity Name: BRYCEVILLE TIMBER, LLC

Current Principal Place of Business:

1200 RIVERPLACE BLVD., #902
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1200 RIVERPLACE BLVD., #902
JACKSONVILLE, FL 32207

New Mailing Address:

P.O. BOX 23627
JACKSONVILLE, FL 32241

FEI Number: 02-0569290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, BRIAN
1200 RIVERPLACE BLVD., #902
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

MCCORMACK, JAMES E
9540 SAN JOSE BLVD
JACKSONVILLE, FL 32207 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: JAMES E MCCORMACK

04/19/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SMITH, R. LEE
Address: 1200 RIVERPLACE BLVD., #902
City-St-Zip: JACKSONVILLE, FL 32207

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: M (X) Change () Addition
Name: WILSON, KENNETH P
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

Title: M () Change (X) Addition
Name: LUEDERS, JACK C JR
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

Title: M () Change (X) Addition
Name: MCCORMACK, JAMES E
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

Title: P () Change (X) Addition
Name: WILSON, KENNETH P
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Change (X) Addition
Name: LUEDERS, JACK C JR
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

Title: S () Change (X) Addition
Name: MCCORMACK, JAMES E
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JAMES E MCCORMACK

M

04/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date