2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

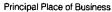
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L05000098563

1. Entity Name

GRISWOLD TIMBERLANDS, LLC

FILED Apr 10, 2007 08:00 A Secretary of State



8935 HIGHWAY 89 MILTON, FL 32570 Mailing Address

8935 HIGHWAY 89 MILTON, FL 32570



02122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3617872

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GRISWOLD, PAUL M 8935 HIGHWAY 89 MILTON, FL 32570

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE			
Signature, typed or printed name of registered agent and trie if applicable (NOTE Registered Agent signature recurred			DATE
Filing Fee is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		HAAAAACCOO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M GRISWOLD, PAUL M 8935 HIGHWAY 89 MILTON, FL 32570		000000696583 04/18/07-80005-001 55.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this lifting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.			