

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000036641

**Entity Name:** MORMAC TIMBER, LLC

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2109 N. HARBOUR DRIVE  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

2109 N. HARBOUR DRIVE  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 20-4677258

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORRIS, HAYES  
2109 N. HARBOUR DRIVE  
LYNN HAVEN, FL 32444 US

**Name and Address of New Registered Agent:**

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MORRIS, HAYES  
**Address:** 2109 N. HARBOUR DRIVE  
**City-St-Zip:** LYNN HAVEN, FL 32444 US

**Title:** MGRM  
**Name:** MCMILLAN, JAMES S  
**Address:** 2109 N. HARBOUR DRIVE  
**City-St-Zip:** LYNN HAVEN, FL 32444 US

I hereby 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:** HAYES MORRIS

MGRM

04/15/2010

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