

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128813

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** SOUTHERN TIMBER SERVICE, LLC

**Current Principal Place of Business:**

2666 NELSONTOWN ROAD  
JAY, FL 32565

**New Principal Place of Business:**

4892 JAMES HENDRICKS ROAD  
JAY, FL 32565

**Current Mailing Address:**

2666 NELSONTOWN ROAD  
JAY, FL 32565

**New Mailing Address:**

4892 JAMES HENDRICKS ROAD  
JAY, FL 32565

**FEI Number:** 27-4573558

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARNES, MAMIE  
2666 NELSONTOWN ROAD  
JAY, FL 32565 US

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

BARNES, MAMIE  
4892 JAMES HENDRICKS ROAD  
JAY, FL 32565 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:

04/23/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BARNES, MAMIE  
Address: 4892 JAMES HENDRICKS ROAD  
City-St-Zip: JAY, FL 32565 US

Title: MGR  
Name: BARNES, CLINTON  
Address: 4892 JAMES HENDRICKS ROAD  
City-St-Zip: JAY, FL 32565 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: MAMIE BARNES

MGRM

04/23/2012

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