File on or before May 1, 1998 or Limited Liability Company will be

subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** 93 APR - 1 PH 1: 09 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L9500000401 1a. Principal Place of Business Address CARRABELLE TIMBER RESOURCES, L.C. POST OFFICE BOX 854 4450 LAFAYETTE STREET MARIANNA FL 32447 MARIANNA FL 32446 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 05/24/1995 FLSulte, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3380611 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip i Country Country SB.75 Additional Fee Required 03/21/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name BONDURANT, FRANK E 4450 LAFAYETTE STREET Street Address (P.O. Box Number is Not Acceptable) MARIANNA FL 32447 100002481001 -04/07/93 -01046 -026 Suite, Apt. #, etc. *****94.38 *****94.38 City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. 1000024810001; DATE_04/07/98--01046--027 SIGNATURE (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** MGRM CORAL RESOURCES, INC. 15739 PROFESSIONAL PLAZA HAMMOND LA MGRM HILDRETH, EMMETT F JR. POST OFFICE BOX 787 ATMORE AL MGRM HATCHER, ROBERT D 2265 ROSWELL ROAD., SUITE MARIETTA GA

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and acquarte and that my signators 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 trus elempowered to effect this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

3-31-98 7709718740