

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 24, 2002 8:00 am
Secretary of State

06-24-2002 90296 011 ****50.00

DOCUMENT # MO1000001830

1. Entity Name

Plum Creek Timber I, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
999 Third Ave.

3. Mailing Address
999 Third Ave.

Suite, Apt. #, etc.
Ste. 2300

Suite, Apt. #, etc.
Ste. 2300

City & State
Seattle, WA

City & State
Seattle, WA

4. FEI Number
91-1920354

Applied For
Not Applicable

Zip
98104

Country
USA

Zip
98104

Country
USA

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City Plantation

FL

Zip Code 33324

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Plum Creek Timber Company,
Inc.
999 Third Ave., Ste. 2300

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Seattle, WA 98104,
(its sole member

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

11. I 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 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.

SIGNATURE: Anna L. Oswald Anna L. Oswald, Asst. Sec. 6/17/02 (206) 467-3705

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

Date

Daytime Phone #

CR2E083B (12/01)