

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000421

FILED  
Apr 02, 2010  
Secretary of State

**Entity Name:** RAYONIER TIMBERLANDS MANAGEMENT, LLC

**Current Principal Place of Business:**

50 N LAURA ST, STE 1900  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

50 N LAURA ST, STE 1900  
JACKSONVILLE, FL 32202

**New Mailing Address:**

FEI Number: 06-1148576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: RAYONIER, INC  
Address: 50 N LAURA ST, STE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

Title: PRES  
Name: THOMAS, LEE M  
Address: 50 N. LAURA ST, STE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

Title: SRVP  
Name: KRAUS, CARL E  
Address: 50 N. LAURA ST, STE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

Title: SEC  
Name: FRAZIER, W. EDWIN III  
Address: 50 N. LAURA ST, STE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

Title: ASEC  
Name: ARTHUR, TRACY K  
Address: 1901 ISLAND WALKWAY  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TREA  
Name: AUGUSTE, MACDONALD  
Address: 50 N. LAURA ST, STE 1900  
City-St-Zip: JACKSONVILLE, FL 32202

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: W. E. FRAZIER, III

SECR

04/02/2010

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