

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004892

FILED
Mar 16, 2009
Secretary of State

Entity Name: TAMPA INTERNATIONAL FOREST PRODUCTS, LLC

Current Principal Place of Business:

8001 WOODLAND CENTER BLVD., SUITE 100
TAMPA, FL 33623

New Principal Place of Business:

8001 WOODLAND CENTER BLVD, #100
TAMPA, FL 33614

Current Mailing Address:

8001 WOODLAND CENTER BLVD., SUITE 100
TAMPA, FL 33623

New Mailing Address:

8001 WOODLAND CENTER BLVD, #100
TAMPA, FL 33614

FEI Number: 20-1805470

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: MGR () Delete
Name: BABCOCK, AARON P
Address: 8001 WOODLAND CENTER BLVD., SUITE 100
City-St-Zip: TAMPA, FL 33623

Title: MGR () Delete
Name: JOHNSTON, CRAIG
Address: 10250 SW GREENBERG RD # 200
City-St-Zip: PORTLAND, OR 97223

Title: MGR () Delete
Name: CODER, DERRICK
Address: 10250 SW GREENBURG RD 200
City-St-Zip: PORTLAND, OR 97223

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BABCOCK, AARON P
Address: 8001 WOODLAND CENTER BLVD, # 100
City-St-Zip: TAMPA, FL 33614

Title: MGR (X) Change () Addition
Name: JOHNSTON, CRAIG
Address: 10250 SW GREENBURG RD, #200
City-St-Zip: PORTLAND, OR 97223

Title: MGR (X) Change () Addition
Name: CODER, DERRICK
Address: 10250 SW GREENBURG RD, #200
City-St-Zip: PORTLAND, OR 97223

Title: ASEC () Change (X) Addition
Name: NEIL, CARL
Address: 1300 SW FIFTH AVE, # 3400
City-St-Zip: PORTLAND, OR 97201

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DERRICK CODER

MGR

03/16/2009

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