

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004789

FILED
Feb 21, 2009
Secretary of State

Entity Name: RILEY FIELD TIMBER COMPANY LLC

Current Principal Place of Business:

8 CTR ST
EXETER, NH 03883

New Principal Place of Business:

8 CENTER ST
EXETER, NH 03883

Current Mailing Address:

PO BOX 570
EXETER, NH 03883

New Mailing Address:

FEI Number: 76-0835803 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 () Delete
Name: CONSERVATION FORESTRY, LLC
Address: 8 CTR ST
City-St-Zip: EXETER, NH 03833

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

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CONSERVATION FORESTRY, LLC
Address: 8 CENTER ST
City-St-Zip: EXETER, NH 03833

Title: MEMB () Change (X) Addition
Name: CONSERVATION FORESTRY CAPITAL I LP
Address: 8 CENTER STREET
City-St-Zip: EXETER, NH 03833

Title: MEMB () Change (X) Addition
Name: CONSERVATION FORESTRY PARALLEL FUND I-A LP
Address: 8 CENTER STREET
City-St-Zip: EXETER, NH 03833

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: FREDERICK W BLUM

CFO

02/21/2009

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