

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

98 JUN 19 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04514

1. Corporation Name

TIMBER ENERGY RESOURCES, INC.

Principal Place of Business

Mailing Address

P.O. BOX 199, HIGHWAY 65 SOUTH
TELOGIA, FLORIDA 32360

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
JULY 18, 1984

2. Principal Place of Business	2a. Mailing Address
21 P.O. BOX 199, HIGHWAY 65 S. Suite, Apt. #, etc.	26 P.O. BOX 199, HIGHWAY 65 S. Suite, Apt. #, etc.
22 City & State	27 City & State
23 TELOGIA, FLORIDA	28 TELOGIA, FLORIDA
24 Zip 32360	29 Zip 32360
25 Country USA	30 Country USA

4. FEI Number 76-0129846	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DONALD E. WENTWORTH
7801 PETERSON POINT ROAD
MILTON, FLORIDA 32583-5599

81 Name CI CORPORATION SYSTEMS	85 Zip Code 33324
82 Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Rd.	
83	
84 City Plantation	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Coryne Bryan CORYNE BRYAN 6/19/98
Signature, typed or printed name of registered agent and the date of appointment (reinstating) DATE

12. OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PRESIDENT & DIRECTOR	<input type="checkbox"/> DELETE	1.1 TITLE	300002569163	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTIN J. SERGI		1.2 NAME	-06/23/98--01041--005	
STREET ADDRESS	7000 BOULEVARD EAST		1.3 STREET ADDRESS	*****8.75 *****8.75	
CITY-ST-ZIP	GUTTENBERG, NJ 07093		1.4 CITY-ST-ZIP		
TITLE	CHAIRMAN OF THE BOARD	<input type="checkbox"/> DELETE	2.1 TITLE	300002569163	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSS PIRASTEN		2.2 NAME	-06/23/98--01041--006	
STREET ADDRESS	7000 BOULEVARD EAST		2.3 STREET ADDRESS	*****550.00 *****550.00	
CITY-ST-ZIP	GUTTENBERG, NJ 07093		2.4 CITY-ST-ZIP		
TITLE	EXECUTIVE VICE PRES. & DIRECTOR	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAM F. KAISER		3.2 NAME		
STREET ADDRESS	7000 BOULEVARD EAST		3.3 STREET ADDRESS		
CITY-ST-ZIP	GUTTENBERG, NJ 07093		3.4 CITY-ST-ZIP		
TITLE	SENIOR VICE PRES. & DIRECTOR	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT E. WETZEL		4.2 NAME		
STREET ADDRESS	7000 BOULEVARD EAST		4.3 STREET ADDRESS		
CITY-ST-ZIP	GUTTENBERG, NJ 07093		4.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with an address.

SIGNATURE Kelley H. H. JUNE 19, 1998 (2001) 054 3777

CR2E034 (10/97)