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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000044014

BENNETT'S LOGGING, INC.

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90001 027 ***150.00



Principal Place	of Business	Mailing Address				1 1001100 110	18181 16111 88111 88		1811 61811 88181	(1811 8181 1881
606 FLORIDA AVENUE YULEE FL 32097 YULEE FL 32097							DO NOT WRI	TE IN THIS	SPACE	
						3. Date Incorpora				
						05/13/1998				
2. Principal Pl				4. FEI Number			Ar	oplied For		
— 2 <u>~</u> ∶	O Haven Road	26 P.D. BOX	20	3		59-3515	781		No	ot Applicable
Suite, Apt.		Suite, Apt. #, etc.				5. Certifcate of S	tatus Desired		v	Additional equired
City & State	FL			6. Election Camp Trust Fund Co	ntribution	<u></u>	- Added	May Be to Fees		
zip 7 24 32091			30 (/	ASSA 4		8. This corporation Personal Property	erty Tax.		☐ Yes	No
	9. Name and Address of Current	Registered Agent		81 Namen		0. Name and Ad	dress of New I			
DENN	JETT DONALD E SR			81 Name	<u>Senne</u>	ett Dona	ald F.	Sr	•	
BENNETT, DONALD F SR 606 FLORIDA AVENUE					Address	(P.O. Box Numbe	r is Not Accepta	ble)		
YULEE FL 32097				83	30	10 Hav	en Ro	<u>ત્રહ</u>		
1000	E 1 E 02007			53						
				84 City \	Yule			FL	85 Zip	Code () 97
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statute	s, the at	ove-named	Corporat	ion submits this st	atement for the	purpose of	changing its	registered
l office or re	egistered agent, or both, in the State of familiar with, and accept the obligation	of Florida. Such change was au	thorized	by the corpo	oration's	board of directors	. I nereby accep	ot the appoi	ntment as re	gistered
	The tarring with, and accept the congen	5,10 6,1 5 5 5 6,11 6 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7								
SIGNATURE	Registered	Agent signature n	required whe	n reinstating)		DATE				
12.	OFFICERS AND		13.			ADDITIONS/CH	ANGES TO OF	FICERS AN		
TITLE	D	☐ DELETE	1.1 TIT	LE	5	iett, Dona	Id. F. Sc	3.	Change	☐ Addition
NAME	Bennett, Donald F SR		1.2 NA	ME	Deall	10 Have	Roo	l l		
STREET ADDRESS	P.O. BOX 203 N/A		13 ST	REET ADDRESS	-1.					
CITY-ST-ZIP	YULEE FL 32041			Y-ST-ZIP		ee, I-L	3209		17Abanaa	□ Addition
TITLE	D	DELETE	2.1 TIT	L E	Ď.	nett, Man	Flyah	eth.	Change	☐ Addition
NAME	BENNETT, MARY ELIZABETH		22 NA	ME	benr	Jen, Men	0-0	• •		
STREET ADDRESS	P.O. BOX 203 N/A		2.3 ST	REET ADDRESS	301	0 Haven lee, FI	Roca	_		
CITY-ST-ZIP	YULEE FL 32041			TY-ST-ZIP	14	lee, Fr	<u> </u>	1		□ 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
TITLE		☐ DELETE	3.1 TIT		′				Change	☐ Addition
NAME			3.2 NA							-
STREET ADDRESS			3.3 ST	REET ADDRESS	ľ	-			·	-
CITY-ST-ZIP			_	TY-ST-ZIP		_		_	Chagga	- Addition
TITLE		☐ DELETE	4.1 TIT						Change	☐ Addition
NAME			4. 2 N							
STREET ADDRESS			4.3 ST	REET ADDRESS						
CITY-ST-ZIP		——————————————————————————————————————	_	Y-ST-ZIP	⊢ −					□ #4455
TITLE		☐ DELETE	5.1 TIT						☐ Change	☐ Addition
NAME .			5.2 NA							
STREET ADDRESS				REET ADORESS						
CITY-ST-ZIP		r=1		Y-ST-ZIP	<u> </u>				- Character	["] Addata
TITLE		☐ DELETE	6.1 TIT						☐ Change	Addition
NAME			6 2 NA							
STREET ADDRESS				REET ADDRESS						
CITY-ST-ZIP			6.4 CIT	TY-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 on an attachment with an address, with all other like empowered.

MARY Elizabeth Bennett 2-23-99