

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010641

Entity Name: BAYARD TIMBERLAND COMPANY

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

24091 PHILLIPS HWY.
JACKSONVILLE, FL 32259

New Principal Place of Business:**Current Mailing Address:**

P.O. BOX 54249
JACKSONVILLE, FL 32245

New Mailing Address:

P.O. BOX 959
ORANGE PARK, FL 320670959

FEI Number: 59-0997387

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, DAVID M
1301 RIVERPLACE BLVD., STE. 1500
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

FOSTER, DAVID M
455 PARK AVENUE
ORANGE PARK, FL 32073 US

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:

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().**OFFICERS AND DIRECTORS:**

Title: DP () Delete
Name: KORMAN, HOWARD I
Address: 4490 SOUTHSIDE BLVD.
City-St-Zip: JACKSONVILLE, FL 32216

Title: DCS () Delete
Name: PATTON, MARY CARR
Address: 4490 SOUTHSIDE BLVD
City-St-Zip: JACKSONVILLE, FL 32216

Title: DT () Delete
Name: BIDWILL, CHARLES W JR
Address: 22 REGENT WOOD
City-St-Zip: NORTHFIELD, IL 60093

Title: D () Delete
Name: BIDWILL, CHARLES W III
Address: 1921 SCHILLER AVENUE
City-St-Zip: WILMETTE, IL 60091

Title: DVP () Delete
Name: JOHNSTON, WILLIAM H JR
Address: 65 TARPON LANE
City-St-Zip: KEY LARGO, FL 33037

Title: AS () Delete
Name: KUHN, W. ROBERT JR
Address: 13210 PECKY CYPRESS DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KORMAN, HOWARD I
Address: 455 PARK AVENUE
City-St-Zip: ORANGE PARK, FL 32073

Title: DCS (X) Change () Addition
Name: PATTON, MARY CARR
Address: 455 PARK AVENUE
City-St-Zip: ORANGE PARK, FL 32073

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. ROBERT KUHN, JR.

AS

04/24/2007

Electronic Signature of Signing Officer or Director

Date