

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010641

FILED
Apr 22, 2009
Secretary of State

Entity Name: BAYARD TIMBERLAND COMPANY

Current Principal Place of Business:

24091 PHILLIPS HWY.
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 959
ORANGE PARK, FL 320670959

New Mailing Address:

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
455 PARK AVENUE
ORANGE PARK, FL 32073 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

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

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

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City-St-Zip:

Title: () Change () Addition
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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

04/22/2009

Electronic Signature of Signing Officer or Director

Date