2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #	P99000020663
------------	--------------

GILCHRIST TIMBER COMPANY

					03 MAY -6	AM 11: 27		
360 CENTRAL	e of Business AVENUE URG FL 33701	Mailing Address 360 CENTRAL AVENUE ST. PETERSBURG FL 33	3701		SECRETARY OF			
Principal Place of Business 3. Mailing Address) (BB((BB) 118 \$110 1811) 90114 B	0111 60 441 03 400 4104 8 0	:110 41110 07108 1111 1031		
Suite, Apt. #, etc. Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-3561350	3	Applied For Not Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired		75 Additional Required	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent				
-SNYDER, DAVID B-			Nan I	Name Robert G. Southey				
•		1			(P.O. Box Number is Not Acceptable)			
	RAL AVENUE	i	ļ					
ST. PETER	RSBURG FL 33701	, ;			ral Ave.			
-			City	t. Pete	ersburg,		33701	
	named entity submits this statement fi ions of registered agent.	or the purpose of changing i	ts registered offic	e or registere	d agent, or both, in the State of F	lorida. I am famili	ar with, and accept	
SIGNATURE .	Mul -	m. Inthe			4/29/2	2003		
	Signature, typed or printed name of registered agen	t and title if applicable.	TF: Registered Agent s	gnature required w	then reinstating)	DATE		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00				9. Election Campaign F Trust Fund Contributi		\$5.00 May Be Added to Fees	
Make Check	c Payable to Florida Department of	of State			Trase Faria Continuati	J.1	Added to 1 ees	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND DIRI	ECTORS IN 11	
TITLE	DC	☐ Delete	TITLE				Change	
NAME	MENKE, ROBERT M		NAME)	0000183	302150)	
STREET ADDRESS CITY-ST-ZIP	360 CENTRAL AVENUE ST. PETERSBURG FL 33701	:	STREET ADDRI	ss	05/06/0301090	004 **1	350.00	
TITLE	D	Delete	TITLE	-			Change	
NAME	MEEHAN, DAVID K	,	NAME	}		_		
STREET ADDRESS	360 CENTRAL AVENUE	:	STREET ADDRE	ss				
CITY-ST-ZIP	ST. PETERSBURG FL 33701		CITY-ST-ZIP					
TITLE	AS	☐ Delete	TITLE				Change	
NAME	HAIRE, NANCY C	F	NAME					
STREET ADDRESS	360 CENTRAL AVENUE	;	STREET ADDRE	ss	***			
CITY-ST-ZiP	ST. PETERSBURG FL 33701		CITY-ST-ZIP					
TITLE	DT CONTAINS FOURT O	☐ Delete	TITLE		1. C. C.		Change 🔲 Addition	
NAME	HUSSEMANN, EDWIN C	 	NAME	}				
STREET ADDRESS CITY-ST-ZIP	360 CENTRAL AVENUE ST. PETERSBURG FL 33701	ì	STREET ADDRE	SS				
			CITY-ST-ZIP	1				
TITLE	VPS Snyder, David B	Delete	TITLE	AS	n .	; 🗆 (Change X Addition	
NAME STREET ADDRESS	360 CENTRAL AVENUE	ı	NAME STREET ADDRE	South	ey, Robert G.			
CITY-ST-ZIP	ST. PETERSBURG FL 33701		CITY-ST-ZIP	1300 6	Central Ave. etersburg, FL 33	701		
TITLE	P	Delete	TITLE	July L	ocoradurg En 33		Change	
NAME	BRUBAKER, RICHARD M	LI Delete	NAME	1			mange LT Addition	
	360 CENTRAL AVENUE		STREET ADDRE	ss				
CITY-ST-ZIP	ST. PETERSBURG FL 33701	;	CITY-ST-ZIP					
								

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Nancy C. Haire 4/29/2003 727 823-4000 Asst. Secretary Date

FILED