

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000031379

Entity Name: LONGLEAF TIMBER COMPANY, INC.

FILED  
May 01, 2012  
Secretary of State

## Current Principal Place of Business:

501 RIVERSIDE AVE., SUITE 902  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

9995 GATE PARKWAY NORTH, SUITE 330  
JACKSONVILLE, FL 32246

## Current Mailing Address:

501 RIVERSIDE AVE, SUITE 902  
JACKSONVILLE, FL 32202

## New Mailing Address:

9995 GATE PARKWAY NORTH, SUITE 330  
JACKSONVILLE, FL 32246

FEI Number: 59-3633329

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, BRIAN  
501 RIVERSIDE AVE., SUITE 902  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

BROWN, BRIAN  
9995 GATE PARKWAY NORTH, SUITE 330  
JACKSONVILLE, FL 32246 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:

05/01/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DPST  
Name: SMITH, R. LEE  
Address: 9995 GATE PARKWAY NORTH, SUITE 330  
City-St-Zip: JACKSONVILLE, FL 32246

Title: V  
Name: BROWN, BRIAN E  
Address: 9995 GATE PARKWAY NORTH, SUITE 330  
City-St-Zip: JACKSONVILLE, FL 322046

I hereby 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 all other like empowered.

SIGNATURE: BRIAN BROWN

V

05/01/2012

Electronic Signature of Signing Officer or Director

Date