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 # V03506

MERCER LOGGING, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90158 046 ***150.00

	. 20 22						
Principal Place of Business Mailing Address						1 SERIE MICHIE GRIND HIGH GEREN HIGH GIRLS ALBER ALBIT GIRLS ALBIT GIRLS	BLESS BIBIT LESS
P.O. BOX 21 P.O. BOX 21							
LACOOCHEE FL 33537 LACOOCHEE FL 33537						DO NOT WRITE IN THIS SPACE	
						3. Date incorporated or Qualifed	
						12/26/1991	
2. Principal P	Place of Business	2a. Mailing Address					oplied For
21		26				59-3115287	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	/.dditional
27						Fee F	Required
City & Sta	te	City & State					May Be
23		28				Trust Fund Contribution Added	fees c
Zip	Country	Zip		untry	,	8. This corporation owes the current year Intangible	
24	25	[29]	30	_		Personal Property Tax. Yes	No
	9. Name and Address of Curre	en: Registered Agent		04	N=	10. Name and Address of New Registered Agent	
Mich	OCED TOTAL			81	Name		
	RCER, LOUIS H.			82	Street A	Address (P.O. Bo:: Number is Not Acceptable)	
39410 MERCER RD				-			
EAC	OOCHEE FL 33537			83			
				84	City	85 Ziç	Code
				<u>L</u>	L	FL °° ~ °	
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the State	502 and 607.1508, Florida Stat e r t Florida. Such change was	tutes, the a	above d bv	e-named control of the corpor	corporation submits this statement for the purpose of changing in pration's board of directors. I hereby accept the appointment as	s registerea egistered
agent. a	am familiar with, and accept the oblig	pations of, Section 607.0505, F	Torida Stat	utes	i. '	, ,	_
SIGNATURE							
12.	Signature, typed or printed na ne of registered ag		T : Registered		nt signature req	og red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECT	OES IN 12
		NE) DIRECTORS ☐ DELETE	1.1 T			☐ Change	
TITLE	D NEBOCE LOUIS H		1.2 N		-		
NAME	MERCER, LOUIS H.		ı				
STREET ADDRE 3S			1		TADDRESS		
CITY-ST-ZIP	LACOOCHEE FL 33537	☐ DELETE	1.4 C	TY-S	T-ZIP	Change	Addition
TITLE			1				
NAME			2.2 N				
STREET ADDRESS			4		TADDRESS		
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NAME	ļ				TADDRESS		
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NAME	Ţ				T ADDRESS		
STREET ADDRESS			•				1
CITY-ST-ZIP		☐ DELETE	4.4 C	ITY-S	1-2119	☐ Change	Addition
]	L. DELETA	5.1 T				
NAME					TADDRESS		
STREET ADDRESS	1			ITY-S			į
CITY-ST-ZIP		☐ DELETE	6.1 T		1-21	☐ Change	Addition
TITLE			6.2 N			_ Charge	<u> </u>
NAME OTDOOR ADDDOOR					T ADDRESS		
STREET ADDRES	9				T-ZIP		
CITY-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 uncer 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.

SIGNATURE: ___

NIGNATURE AND TYPED OR PHINTID NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99 (35) 521-449

Laytime Phone #