

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41762

Entity Name: STRICKLAND TIMBER, INC.**Current Principal Place of Business:**U. S. HIGHWAY #1-VOLUSIA FLAGLER COUNTY
BUNNELL, FL 32110**Current Mailing Address:**P.O. BOX 248
BUNNELL, FL 32110**FEI Number:** 59-2748621**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STRICKLAND, MARCUS C.
U. S. HIGHWAY #1,
BUNNELL, FL 32110 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name STRICKLAND, MARCUS C.
Address U.S. HWY #1
City-State-Zip: BUNNELL FL

Title VP
Name STRICKLAND, CALEB WYATT
Address U. S. HIGHWAY #1-VOLUSIA FLAGLER
COUNTY
City-State-Zip: BUNNELL FL 32110

Title SECRETARY
Name STRICKLAND, SUSAN JEAN
Address U. S. HIGHWAY #1-VOLUSIA FLAGLER
COUNTY
City-State-Zip: BUNNELL FL 32110

Title VP
Name STRICKLAND, JOSHUA RYAN JR.
Address U. S. HIGHWAY #1-VOLUSIA FLAGLER
COUNTY
City-State-Zip: BUNNELL FL 32110

Title VP
Name STRICKLAND, JOEL CARLTON
Address U. S. HIGHWAY #1-VOLUSIA FLAGLER
COUNTY
City-State-Zip: BUNNELL FL 32110

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: MARCUS C STRICKLAND

PD

04/10/2022

Electronic Signature of Signing Officer/Director Detail

Date