

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000001690

Entity Name: TERRAPOINTE LLC**Current Principal Place of Business:**1301 RIVERPLACE BLVD.
SUITE 2300
JACKSONVILLE, FL 32207**Current Mailing Address:**1301 RIVERPLACE BLVD.
SUITE 2300
JACKSONVILLE, FL 32207**FEI Number:** 59-3607205**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title MGRM
Name RAYONIER PRODUCTS LLC.
Address 1301 RIVERPLACE BLVD., SUITE 2300

City-State-Zip: JACKSONVILLE FL 32207

Title VP
Name ARTHUR, TRACY K
Address 1901 ISLAND WALKWAY
City-State-Zip: FERNANDINA BEACH FL 32034

Title SENIOR VP, ASST SECRETARY
Name HERMAN, MICHAEL R
Address 1301 RIVERPLACE BLVD., SUITE 2300

City-State-Zip: JACKSONVILLE FL 32207

Title VP
Name BRIDWELL, MARK R
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title SENIOR VP, CONT, TREASURER
Name VANDEN NOORT, HANS E
Address 1301 RIVERPLACE BLVD., SUITE 2300

City-State-Zip: JACKSONVILLE FL 32207

Title SECR
Name VAN TUYL, CHRISTOPHER
Address 1301 RIVERPLACE BLVD., SUITE 2300

City-State-Zip: JACKSONVILLE FL 32207

Title ACTING PRESIDENT
Name KIKER, H. E.
Address 1301 RIVERPLACE BLVD.
SUITE 2300

City-State-Zip: JACKSONVILLE FL 32207

Title VP
Name FISHER, S. ALLISTER
Address 1301 RIVERPLACE BLVD.
SUITE 2300

City-State-Zip: JACKSONVILLE FL 32207

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER VAN TUYL**SECRETARY****04/05/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title VP
Name WINER, SCOTT D
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST SECRETARY
Name DAVIS, BRENDA K
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST SECRETARY
Name JONES, CYNTHIA L
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST SECRETARY
Name MCHUGH, WILLIAM M
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST TREASURER
Name FRICKE, ANDREW K
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST SECRETARY
Name DAVIS, LAURA
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST SECRETARY
Name LOWE, ELIZABETH M
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207

Title ASST SECRETARY
Name SLAUGHTER, RICHARD C
Address 1301 RIVERPLACE BLVD.
SUITE 2300
City-State-Zip: JACKSONVILLE FL 32207