

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086334

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: BALDWIN OFFICE PARK LLC

**Current Principal Place of Business:**

8421 S. ORANGE BLOSSOM TRAIL  
SUITE 270  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

8421 S. ORANGE BLOSSOM TRAIL  
SUITE 270  
ORLANDO, FL 32809

**New Mailing Address:**

FEI Number: 26-0102358      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BARINAS, FROILAN  
8421 S. ORANGE BLOSSOM TRAIL  
SUITE 270  
ORLANDO, FL 32809 US

**Name and Address of New Registered Agent:**

BARINAS, FROILAN DDS  
8421 S. ORANGE BLOSSOM TRAIL  
SUITE 270  
ORLANDO, FL 32809 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: FROILAN BARINAS      03/13/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BARINAS, FROILAN DR  
Address: 8421 S. ORANGE BLOSSOM TRAIL#270  
City-St-Zip: ORLANDO, FL 32809

Title: MGRM ( ) Delete  
Name: RAMPHAL, MOTIELAL  
Address: 8421 S. ORANGE BLOSSOM TRAIL#270  
City-St-Zip: ORLANDO, FL 32809

Title: MGRM ( ) Delete  
Name: RAMDAN, DAVID  
Address: 8421 S. ORANGE BLOSSOM TRAIL#270  
City-St-Zip: ORLANDO, FL 32809

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: CARVALHO, ENIO  
Address: 8421 S. ORANGE BLOSSOM TRAIL#270  
City-St-Zip: ORLANDO, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: FROILAN BARINAS      MGRM      03/13/2007  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date