

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000086334

**Entity Name:** BALDWIN OFFICE PARK LLC

**Current Principal Place of Business:**

0450 NORTH ROCKS SPRINGS RD.  
APOPKA, FL 32712

**Current Mailing Address:**

1450 NOTH ROCH SPRINGS RD.  
SUITE 108  
APOPKA, FL 32712

**FEI Number:** 26-0102358

**Certificate of Status Desired:** No

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

BARINAS, FROILAN DDS  
11031 ULLSWATER LN.  
WINDERMERE, FL 34786 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 BARINAS, FROILAN DR  
Address 11031 ULLSWATER LN.  
City-State-Zip: WINDERMERE FL 34786

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FROILAN BARINAS

PREST

03/22/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date