## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 413936** 

Entity Name: DEAN BALDWIN PAINTING, INC.

FILED Apr 05, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
15560 OCEAN BREEZE L WELLINGTON, FL 33414	·· ·		
Current Mailing Address:		New Mailing Address:	
9300 S DADELAND BLVD		15560 OCEAN BREEZE LN	
408 MIAMI, FL 33156 US		WELLINGTON, FL 33414 US	
FEI Number: 59-1686706	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
KADE, PAUL M ESQ.	N DL V/D		

9200 ŚOUTH DADELAND BLVD. SUITE 400 MIAMI, FL 33156 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition BALDWIN, LARRY D., BALDWIN, LARRY D Name: Name: 15560 OCEAN BREEZE LANE Address: 15560 OCEAN BREEZE LANE Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: STD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BALDWIN, BARBARA V
 Name:

 Address:
 15560 OCEAN BREEZE LN.
 Address:

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BALDWIN, CARL D
 Name:

 Address:
 15560 OCEAN BREEZE LANE
 Address:

 City-St-Zip:
 WELLINGTON, FL 33414
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARBARA V. BALDWIN VD 04/05/2004