

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004740

Entity Name: BALDWIN FILTERS, INC.

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

4400 E HWY 30
KEARNEY, NE 68848

New Principal Place of Business:

Current Mailing Address:

840 CRESCENT CENTRE DRIVE
SUITE 600
FRANKLIN, TN 37067

New Mailing Address:

FEI Number: 36-3155641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: FERRISE, SAM
Address: 4400 EAST HIGHWAY 30
City-St-Zip: KEARNEY, NE 688486010

Title: VTD () Delete
Name: KLEIN, BRUCE A
Address: 840 CRESCENT CENTRE DR STE 600
City-St-Zip: FRANKLIN, TN 37067

Title: VSD () Delete
Name: WOLFSON, RICHARD
Address: 840 CRESCENT CTR DR STE 600
City-St-Zip: FRANKLIN, TN 37067

Title: D () Delete
Name: JOHNSON, NORMAN
Address: 840 CRESCENT CTR DR STE 600
City-St-Zip: FRANKLIN, TN 37067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRUCE A. KLEIN

VTD

04/02/2009

Electronic Signature of Signing Officer or Director

Date