

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003184

FILED  
Jun 22, 2009  
Secretary of State

**Entity Name:** BALDWIN AUTOMOTIVE, FARM AND INDUSTRIAL SUPPLY, INCORPORATED

**Current Principal Place of Business:**

1055 US 301  
BALDWIN, FL 32234

**New Principal Place of Business:**

**Current Mailing Address:**

1055 US 301  
BALDWIN, FL 32234

**New Mailing Address:**

**FEI Number:** 26-0232959

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TURNER, STEVEN R  
1055 US 301  
BALDWIN, FL 32234 US

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

TURNER, STEVEN R OWNER  
1055 US 301  
BALDWIN, FL 32234 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: STEVEN R.TURNER

06/22/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: TURNER, STEVEN R  
Address: 1055 US 301  
City-St-Zip: BALDWIN, FL 32234

Title: DAS ( ) Delete  
Name: FOSTER, MIKE  
Address: 1055 US 301  
City-St-Zip: BALDWIN, FL 32234

Title: D ( ) Delete  
Name: TURNER, GREGORY W  
Address: 1055 US 301  
City-St-Zip: BALDWIN, FL 32234

Title: VP ( ) Delete  
Name: HANCOCK, TOM  
Address: 1055 US 301  
City-St-Zip: BALDWIN, FL 32234

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: TURNER, STEVEN R OWNER  
Address: 1055 US 301  
City-St-Zip: BALDWIN, FL 32234

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: STEVEN R TURNER

OWNE

06/22/2009

Electronic Signature of Signing Officer or Director

Date