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**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **J59983**

1. Corporation Name

J.B. BALDWIN LAND CO., INC.

											<b>1</b>
Principal Place	e of Business	Mailing A	ddress				118	MITTER BEAT BEING ERIER	1818: 18:08 (11) (		91811 61611 1681
FUGATE BUILDI	ING 4TH ST.	% PARSLE	EY BALDWIN REA	ALTY							
P.O. BOX 605			P.O. BOX 605					50,1103	MOTE IN	TUIC COACE	
BOCA GRANDE FL 33921 BOCA GRANDE FL			ANDE FL 33921	921						THIS SPACE	<del></del>
		US					3. Date Inc.	corporated or Qui /1987	alited		
2. Principal Pl	lace of Business	2a. Mailin	ng Address		_		4. FEI Nun		٠	-   A	pplied For
21	-	26				•	59-287	73824			ot Applicable
Suite, Apt.	#, etc.		Apt. #, etc.			_			ed 🗆	\$8.75	Additional
22		27					5. Certifica	te of Status Desi	eu 🗀	Fee F	tequired
City & State	e	City 8	State .				6. Election	Campaign Éinar	icing	\$5.00	May Be
23		28					Trust Fo	and Contribution		Added	to Fees
Zip	Country	Zip		Countr	ry		8. This cor	poration owes th	e current yea		
24	25	29		30				al Property Tax.		Yes	□No
	9. Name and Address of Curr	rent Registered	Agent				10. Name a	and Address of	New Registe	ered Agent	
				8	1 1	Name					ļ
	DWIN, J.B.			82	2 5	Street Ade	Idress (P.O. Box	Number is Not A	cceptable)		
	W 4TH ST.				-  `						
BOC	A GRANDE FL 33921			83	3						
	:			84	A	City				85 Zip	Code
ì	•			ł				•		FL     `	ľ
								11.1 -4-44.6	an tha numa	an of observing it	s registered
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.150	8, Florida Statut	es, the above	ve-n	named co	rporation submits	s this statement t	or the purpo	se of changing if	anistored
l office or n	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the obligations.	ate of Florida. Suc	ch change was a	iutnorizea bi	ry the	amed cor e corpora	rporation submits ition's board of di	s this statement t irectors. I hereby	accept the a	se of changing in appointment as r	egistered
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office or re agent. I as	registered agent, or both, in the Sta	ate of Florida, Sud ligations of, Section	ch change was a on 607.0505, Flo	orida Statute	y the es.	e corpora	rporation submits tion's board of di	s this statement t irectors. I hereby	accept the a	эрропипен аз н	egistered
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP