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Secretary of State

07-18-2005 90109 014 ****50.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000093559

1. Entity Name
REV. JUDITH BALDWIN, LLC

Principal Place of Business	Mailing Address
2089 ENTERPRISES OSTEEN ROAD DELTONA, FL 32738	2089 ENTERPRISES OSTEEN ROAD DELTONA, FL 32738

3001U3U3

07132005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BALDWIN, JUDITH A 2089 ENTERPRISE OSTEEN ROAD DELTONA, FL 32738	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 7, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BALDWIN, JUDITH A 2089 ENTERPRSE OSTEEN ROAD DELTONA, FL 32738	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. 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 report is true and accurate and that my 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.

SIGNATURE: Judith Baldwin 07/13/05 407.322.2689
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CLERMONT OFFICE
Jerry D. Brown, C.P.A.

Herbert John Greenlee, Jr. C.P.A.
Suzanne M. Brownlee, C.P.A.

GREENLEE
KURRAS
RICE &
BROWN, PA
CERTIFIED PUBLIC ACCOUNTANTS

MOUNT DORA OFFICE
John S. Rice, C.P.A.
Patricia A. Sykes-Amos, C.P.A.
C. L. (Chip) Garner, C.P.A.

Dorothy A. Kurras, C.P.A.
Keire Rice Hosley, C.P.A.
David A. Donofrio, C.P.A.

ATTACHMENT

30010909

Mount Dora Office
August 23, 2005

Florida Division of Corporations
PO Box 6478
Tallahassee, FL 32314

Subject: REV JUDITH BALDWIN LLC

Reference Number: L04000093559

Division of Corporations,

This is in response to your letter dated July 21, 2005 (copy enclosed) regarding the 2005 Limited Liability Company Annual Report for the above LLC. Since this is classified as a "Single-Member LLC" for federal income tax purposes, *the FEI is Not Applicable*, and the report has been marked as such.

If you have any questions, please do not hesitate to call.

Very truly yours,

GREENLEE, KURRAS, RICE & BROWN PA CPA'S

By C L Garner CPA
C L (Chip) Garner, CPA

Enclosure

Copy: J Baldwin (w/enclosures)