2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000030880

1. Entity Name
BALDWIN INVESTMENT GROUP, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04-19-2007 90033 007 ****50.00

07 JUL -3 PM 2:59

Principal Place of Business
~~370 W. COCOA BEACH CSWY~~
~~COCOA BEACH, FL 32931 US~~

Mailing Address
P.O. BOX 542804 — OK
MERRITT ISLAND, FL 32954

2. Principal Place of Business - No P.O. Box #
450 Riverside Ave

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03012007 Chg-LLC CR2E083 (12/06)

City & State
Merritt Island

City & State

4. FEI Number
20-3508234

Applied For
Not Applicable

Zip
32953

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

BALDWIN, CALVIN D
~~370 COCOA BEACH CSWY~~
~~COCOA BEACH, FL 32931~~

7. Name and Address of New Registered Agent

Name
BALDWIN, CALVIN D

Street Address (P.O. Box Number is Not Acceptable)
450 RIVERSIDE AVE

City
MERRITT ISLAND FL

Zip Code
32953

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 _____ DATE 4/16/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	MGRM	☐ Delete
NAME	BALDWIN, CALVIN D	
STREET ADDRESS	~~370 COCOA BEACH CSWY~~	
CITY-ST-ZIP	~~COCOA BEACH, FL 32931~~	
TITLE	MGRM	☐ Delete
NAME	BALDWIN, DEBRA	
STREET ADDRESS	~~370 COCOA BEACH CSWY~~	
CITY-ST-ZIP	~~COCOA BEACH, FL 32931~~	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS / CHANGES

TITLE	MGRM	☑ Change ☐ Addition
NAME	BALDWIN, CALVIN D	
STREET ADDRESS	PO BOX 542804	
CITY-ST-ZIP	MERRITT ISLAND, FL 32954	
TITLE	MGRM	☐ Change ☐ Addition
NAME	BALDWIN, DEBRA	
STREET ADDRESS	PO BOX 542804	
CITY-ST-ZIP	MERRITT ISLAND, FL 32954	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Debra Baldwin 4/16/07 321-720-4174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #