2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003777

FILED Apr 13, 2009 Secretary of State

Entity Name: BALDWIN PARK JOINT COMMITTEE, INC. **Current Principal Place of Business: New Principal Place of Business:** 2180 WEST SR 434 **SUITE 5000** LONGWOOD, FL 32779 **New Mailing Address: Current Mailing Address:** 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 FEI Number: 82-0547251 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ADKINS, RICHARD Name: Name: 4776 NEW BROAD ST STE 110 Address: Address: City-St-Zip: ORLANDO, FL 32814 City-St-Zip: Title: STD () Delete Title: () Change () Addition MEEKS, KIMBERLY Name: Name: Address: 4776 NEW BROAD ST STE 110 Address: City-St-Zip: ORLANDO, FL 32814 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change () Addition CLASSE, JOHN H JR CLASSE, JOHN H Name: Name: 4776 NEW BROAD ST STE 110 Address: 4776 NEW BROAD ST STE 110 Address: City-St-Zip: ORLANDO, FL 32814 City-St-Zip: ORLANDO, FL 32814 Title: () Delete Title: D (X) Change () Addition Name: CHILDS, GINNY Name: SCHIRTZINGER, JIM 4033 ANISSA AVE Address: Address: 4497 TRAPP LN City-St-Zip: ORLANDO, FL 32814 City-St-Zip: ORLANDO, FL 32814 Title: () Delete Title: (X) Change () Addition LLOYD, LES VICKEY, JESSE Name: Name: 3773 ETHAN LN 2030 COMMON WAY RD Address: Address: ORLANDO, FL 32814 City-St-Zip: City-St-Zip: ORLANDO, FL 32814

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD ADKINS PD 04/13/2009