2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007
Secretary of State

DOCUMENT# N02000003778

Entity Name: BALDWIN PARK RESIDENTIAL OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. SR 434
STE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W. SR 434
STE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 41-2044642 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 W. SR 434
STE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: PACE, DAVID G
Address: 4776 NEW BROAD ST STE 110
City-St-Zip: ORLANDO, FL 32814

Title: STD ( ) Delete
Name: ADKINS, RICHARD L JR
Address: 4776 NEW BROAD ST STE 110
City-St-Zip: ORLANDO, FL 32814

Title: VPD ( ) Delete
Name: CLASSE, JOHN H JR
Address: 4776 NEW BROAD ST STE 110
City-St-Zip: ORLANDO, FL 32814

Title: D ( ) Delete
Name: SANGIOVANNI, PAUL
Address: 1391 FERN AVE
City-St-Zip: ORLANDO, FL 32814

Title: D ( ) Delete
Name: MEEKS, KIMBERLY
Address: 4486 TWINVIEW LN
City-St-Zip: ORLANDO, FL 32814

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ADKINS, RICHARD
Address: 4776 NEW BROAD ST STE 110
City-St-Zip: ORLANDO, FL 32814

Title: STD (X) Change ( ) Addition
Name: MEEKS, KIMBERLY
Address: 4486 TWINVIEW LN
City-St-Zip: ORLANDO, FL 32814

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GRIFFIN, JOHN
Address: 4717 FOX ST
City-St-Zip: ORLANDO, FL 32814

I hereby certify that the information supplied with this filing does not qualify for the 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 03/30/2007

Electronic Signature of Signing Officer or Director — Date