

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 30, 2007**  
**Secretary of State**

DOCUMENT# N06000002890

**Entity Name:** BALDWIN PARK NO. 4 CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**825 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33071**New Principal Place of Business:**107 N. LINE DR.  
APOPKA, FL 32703 US**Current Mailing Address:**825 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33071**New Mailing Address:**107 N. LINE DR.  
APOPKA, FL 32703 US**FEI Number:** 20-4528200**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MARGOLIS, STEPHEN  
825 CORAL RIDGE DRIVE  
CORAL SPRINGS, FL 33071 US**Name and Address of New Registered Agent:**SUTHERLAND, THERESA D  
107 N. LINE DR.  
APOPKA, FL 32703 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: THERESA D SUTHERLAND

08/30/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MARGOLIS, STEPHEN  
Address: 825 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ST ( ) Delete  
Name: MATZKES, MICHAEL  
Address: 825 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: V ( ) Delete  
Name: GLUCKMAN, NICHOLAS  
Address: 825 CORAL RIDGE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: O'SHEA, TOM  
Address: 3279 PARKLAND DRIVE  
City-St-Zip: ORLANDO, FL 32714 US

Title: DVPT (X) Change ( ) Addition  
Name: COX, SHEILA  
Address: 2315 UPPER PARK ROAD, UNIT 102  
City-St-Zip: ORLANDO, FL 32814 US

Title: DS (X) Change ( ) Addition  
Name: QUEEN, DORIS  
Address: 2315 UPPER PARK ROAD, UNIT 301  
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: TOM O'SHEA

DP

08/30/2007

Electronic Signature of Signing Officer or Director

Date