

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002890

FILED
Feb 17, 2009
Secretary of State

Entity Name: BALDWIN PARK NO. 4 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

461 A1A BCH. BLVD.
ST. AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

461 A1A BCH. BLVD.
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 20-4528200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBS, MARY W
461 A1A BCH. BLVD.
ST. AUGUSTINE, FL 32080 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: DP () Delete
Name: O'SHEA, TOM
Address: 3279 PARKLAND DRIVE
City-St-Zip: ORLANDO, FL 32714 US

Title: DS () Delete
Name: QUEEN, DORIS
Address: 6951 CAMINO DEGRAZIA
City-St-Zip: SAN DIEGO,, CA 92111 US

Title: DVT () Delete
Name: COX, SHEILA
Address: 2315 UPPER PARK RD #102
City-St-Zip: ORLANDO, FL 32814

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARIO, FERRERI
Address: 2856 HIGHTLAND VIEW CIRCLE
City-St-Zip: CLERMONT, FL 34711

Title: DP (X) Change () Addition
Name: QUEEN, DORIS
Address: 6951 CAMINO DEGRAZIA
City-St-Zip: SAN DIEGO,, CA 92111 US

Title: D (X) Change () Addition
Name: COX, SHEILA
Address: 4455 TWINVIEW LANE
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: DORIS QUEEN

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date