2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005039

Apr 22, 2008 Secretary of State

Entity Name: ENDERS PLACE AT BALDWIN PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR. 434 SUITE 5000 4248 NEW BROAD ST. LONGWOOD, FL 327795044

SUITE 101

ORLANDO, FL 32814

Current Mailing Address: New Mailing Address:

2180 WEST SR. 434 SUITE 5000 1600 W. COLONIAL DR. LONGWOOD, FL 327795044 ORLANDO, FL 32804

FEI Number: 20-4303996 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:

BECKER & POLIAKOFF, P.A. 3111 STIRLING ROAD US FORT LAUDERDALE, FL 33312

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

NEGRIN, METIN NEGRIN, METIN Name: Name:

2180 WEST STATE ROAD 434, SUITE 5000 Address: 654 MADISON AVE., SUITE 703 Address:

City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: NEW YORK, NY 10065

(X) Change () Addition Title: () Delete Title:

Name: DEROW, JAMES Name: BIALES, DENNIS Address: 2180 WEST STATE ROAD 434, SUITE 5000 Address: 654 MADISON AVE., SUITE 703

City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: NEW YORK, NY 10065

Title: () Delete Title: STD (X) Change () Addition GRIFFITH, FATIMA Name: HANSKI, ADAM Name:

2180 WEST STATE ROAD 434, SUITE 5000 654 MADISON AVE., SUITE 703 Address: Address:

City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: NEW YORK, NY 10065

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: METIN NEGRIN PD 04/22/2008