2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jan 13, 2006 08:00 AM Secretary of State DOCUMENT # P01000063265 1. Entity Name ED BALDWIN INC. Principal Place of Business Mailing Address 569 ALMOND LANE **569 ALMOND LANE** BIG PINE KEY, FL 33043 BIG PINE KEY, FL 33043 01062006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1136695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BALDWIN, EDWARD J DO NOT WRITE 569 ALMOND LANE BIG PINE KEY, FL 33043 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. U00000385438 Signature, typed or printed name of registered agent and title il applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS BALDWIN, EDWARD J NAME STREET ADDRESS 569 ALMOND LN. CITY-ST-ZIP BIG PINE KEY, FL 33043 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

EDWARD J BALDWIN

FILED