

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000077919

FILED
May 08, 2005
Secretary of State

Entity Name: BALDWIN PROPERTY MANAGEMENT INC.

Current Principal Place of Business:

P.O. BOX 20481
TAMPA, FL 33622 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20481
TAMPA, FL 33622 US

New Mailing Address:

FEI Number: 77-0633971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGALZOOM NEVADA INC
44 W. FLAGLER ST.
SUITE 675
MIAMI, FL 33130 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: STERLING, BALDWIN
Address: P.O. BOX 20481
City-St-Zip: TAMPA, FL 33622 US

Title: TREA () Delete
Name: STERLING, DEBRA
Address: P.O. BOX 20481
City-St-Zip: TAMPA, FL 33622 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BALDWIN STERLING

PRES

05/08/2005

Electronic Signature of Signing Officer or Director

Date