2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115190

Entity Name: OCCOQUAN GROUP BALDWIN PARK CORPORATION

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 229 E ALTAMONTE DRIVE 4821 NEW BROAD STREET ORLANDO, FL 32814 1130 ALTAMONTE SPRINGS, FL 32701 US **New Mailing Address: Current Mailing Address:** 229 E ALTAMONTE DRIVE 13506 SUMMERPORT VILLAGE PKWY 1130 # 415 ALTAMONTE SPRINGS, FL 32701 US WINDERMERE, FL 34786 US FEI Number: 26-1311558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: SCOLERI-PILSON, JENNIFER M SCOLERI, DAVID A 11922 CAMDEN PARK DRIVE 13506 SUMMERPORT VILLAGE PKWY WINDERMERE, FL 34786 # 415 WINDERMERE, FL 34786 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: DAVID A. SCOLERI 04/01/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P/CF () Delete Title: PCFO. (X) Change () Addition Name: SCOLERI, DAVID A Name: SCOLERI, DAVID A 11343 N CAMDEN COMMONS DR. 11343 N CAMDEN COMMONS DR. Address: Address: City-St-Zip: WINDERMERE, FL 34786 US City-St-Zip: WINDERMERE, FL 34786 US () Delete EVP Title: Title: () Change () Addition Name: SCOLERI, MARGARET J Name: 11343 N CAMDEN COMMONS DR. Address: Address: WINDERMERE, FL 34786 US City-St-Zip: City-St-Zip: () Delete Title: Title: CFO () Change () Addition SCOLERI-PILSON, JENNIFER M Name: Name: 11922 CAMDEN PARK DRIVE Address: Address: WINDERMERE, FL 34786 US City-St-Zip: City-St-Zip: Title: SVP () Delete Title: () Change () Addition PILSON, GLENN O Name: Name: 11922 CAMDEN PARK DRIVE Address: Address: City-St-Zip: WINDERMERE, FL 34786 US City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A. SCOLERI PCEO 04/01/2009