

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000085301

FILED  
Jan 27, 2010  
Secretary of State

**Entity Name:** BAKER & WARREN CONSULTING ENGINEERS, INC.

**Current Principal Place of Business:**

190 W. DOGWOOD AVE.  
DUFUNIAK SPRINGS, FL 32433

**New Principal Place of Business:**

**Current Mailing Address:**

190 W. DOGWOOD AVE.  
DUFUNIAK SPRINGS, FL 32433

**New Mailing Address:**

**FEI Number:** 27-1297443      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARREN, AARON M  
190 W DOGWOOD AVE  
DEFUNIAK SPRINGS, FL 32433      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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WARREN, AARON M  
**Address:** 190 W. DOGWOOD AVE  
**City-St-Zip:** DEFUNIAK SPRINGS, FL 32433 US

**Title:** CFO  
**Name:** BAKER, SYLENA M  
**Address:** 2583 HIGHWAY 81A  
**City-St-Zip:** PONCE DE LEON, FL 32455

**Title:** SECR  
**Name:** WARREN, AARON M  
**Address:** 190 W. DOGWOOD AVE  
**City-St-Zip:** DEFUNIAK SPRINGS, FL 32433

I hereby 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 all other like empowered.

SIGNATURE: SYLENA M. BAKER

CFO

01/27/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date