


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000022916*

1. Entity Name
BALDWIN ENTERPRISES, INC.



Principal Place of Business
**370 W COCA BEACH CSWY
 COCOA BEACH, FL 32931**

Mailing Address
**370 W COCA BEACH CSWY
 COCOA BEACH, FL 32931**



03222004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3174965

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fes Required**

6. Name and Address of Current Registered Agent

**BALDWIN, C D
 370 W COCOA BEACH CSWY
 COCOA BEACH, FL 32931**

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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.

SIGNATURE *C.D. Baldwin* DATE 3/21/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|----------------|------------------------|
| TITLE | D |
| NAME | BALDWIN, C D |
| STREET ADDRESS | 370 W COCOA BEACH CSWY |
| CITY-ST-ZIP | COCOA BEACH, FL 32931 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *C.D. Baldwin* 3/21/04 321-784-9737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #