## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000078356 (7)

BALDWIN TURF, INC.

Principal Place of Business

Mailing Addross

## **FILED** May 13 1998 8:00am Secretary of State



115-D N.W. RACETRACK RD. FT, WALTON BEACH FL 32547		115-D N.W. RACETRACK RD. FT. WALTON BEACH FL 32547		DO NOT WRITE IN THIS SPACE			
					<ol><li>Date Incorporated or Qualified 09/10/1997</li></ol>		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ar	oplied For
21 203 GOVERNMENT STREET 26 203 GOVERNY			<b>U</b> Men	ot Smeet	59-3467894		ot Applicable
Suite, Apt. (		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	Additional equired
City & State  23 NICEVILLE, FLORIDA		City & State  NICEVILLE TOKIDA		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 115A	Zip	Country		8. This corporation owes or has paid the current year Intangible		
24 325		29 32578 30	us	<u>A</u>			] No
	9. Name and Address of Current F	legistered Agent		1	10. Name and Address of New Registered	Agent	
	NTON, MITCHELL		81	Name			1
	-D N.W. RACETRACK RD.		82	Street Addr	ess (P.O. Box Number is Not Acceptable)	•	
FT.	WALTON BEACH FL 32547						
			B3				
			84	City	FL	<b>85</b> Zip (	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.							
SIGNATURE							
12.	Signature: typed or printed numeral registion diagent a OFFICERS AND D		13.	ent signature requir	ed when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	3S IN 12
TITLE	D	DELETE	1.1 1ITLE		7.657.107.0001.11.02.10.11.11.11.11.11.11.11.11.11.11.11.11.	☐ Change	Addition
NAME	HERNDON, D T	_	12 NAME				
STREET ADDRESS	4502 HIGHWAY 20 EAST			T ADDRESS			1
CITY-ST-ZIP	NICEVILLE FL 32578		14 CHY-1				1
TITLE	D	☐ DELETE	21 TITLE			Change	Addition
NAME	NEWTON, MITCHELL		22 NAME				
STREET ADDRESS	115-D N.W. RACETRACK RD.		23 STREE	T ADDRESS			1
CITY-ST-ZIP	FT. WALTON BEACH FL 32547		2 4 CITY-ST-ZIP				ŀ
TITLE	D DELETE 311		3 1 1 TLF			Change	Addition
NAME	BARNICOAT, RON		3 2 NAME				
STREET ADDRESS	203 GOVERNMENT STREET		3 3 STREF	T ADDRESS			
CITY-ST-ZIP	NICEVILLE FL 32578		3 4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 THILE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4 4 CITY-	ST-ZIP			
TITLE		DELETE	51 TITLE			Change	☐ Addition
NAME			52 NAME				ļ
STREET ADDRESS			•	1 ADDRESS			
CITY-ST-ZIP			5.4 CiTY-	S1 - ZIP		7	- Addition
TITLE		☐ DELETE	6 1 TITLE	-		☐ Change	☐ Addition
NAME			62 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	a-III. Back the reference live and the same	thin films done not public for t	6.4 CHY-	S1-ZIP	Section 110 07/3Vi) Florida Statutae I further a	artify that the	Information
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 exocute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.							