

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # F00000003362

1. Entity Name

BALDRIDGE DEVELOPMENT, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 MAY 22 AM 10:29

Principal Place of Business

11825 MANCHESTER ROAD
ST LOUIS MO 63131

Mailing Address

11825 MANCHESTER ROAD
ST LOUIS MO 63131



2. Principal Place of Business - No P.O. Box #

1507 ASTRA WAY

3. Mailing Address

1507 ASTRA WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

ST. LOUIS, MO

City & State

ST. LOUIS, MO

4. FEI Number

91-1858143

Applied For

Not Applicable

Zip

63010-1146

Country

USA

Zip

63010-1146

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON FL 33331

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME BALDRIDGE, KENNETH R
STREET ADDRESS 11825 MANCHESTER ROAD
CITY-ST-ZIP ST LOUIS MO 63131 ☐ Delete

TITLE S
NAME BALDRIDGE, KENNETH R
STREET ADDRESS 11825 MANCHESTER ROAD
CITY-ST-ZIP ST LOUIS MO 63131 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME 1507 ASTRA WAY
STREET ADDRESS ST. LOUIS, MO 63010-1146 ☒ Change ☐ Addition
CITY-ST-ZIP

TITLE
NAME 1507 ASTRA WAY
STREET ADDRESS ST. LOUIS, MO 63010-1146 ☒ Change ☐ Addition
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS 900130895469
CITY-ST-ZIP 06/05/08--01006--001 **\$77.50 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/08
Date

314-966-2300
Daytime Phone #

5/22