2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT					
DOCUMENT # L01000008927				FILED	
1. Entity Nam BALDRID	inlity Name LDRIDGE-NAPLES, L.L.C.			06 APR 13 PM 1:37	
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Principal Place of Business Mailing Address		•	TALLMASSEE, FEG	A LE CRIDA	
ST. LOUIS, N	CHESTER ROAD 10 63131 US	11825 MANCHESTER ROAD St. Louis, Mo 63131 US			
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r	O NOT WRITE	IN THIS SDA	^=	03142006 No Chg-LLC	CR2E083 (11/05)
DO NOT WRITE IN THIS SPACE			9 E	4. FEI Number 58-2627430	Applied For Not Applicable
				5. Certificate of Status Desired	\$5.00 Additional Fee Required
	6. Name and Address of Current Ro	gistered Agent			
PRICE, KE		r 200		DO NOT W	RITE
27200 RIVERVIEW CENTER BLVD., SUITÉ 309 BONITA SPRINGS, FL 34134			IN THIS SPACE		
					~ ~
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 little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$50.00 Due by May 1, 2006					
9.	MANAGING MEMBERS	S/MANAGERS		· · · · · · · · · · · · · · · · · · ·	
TITLE NAME	MGRM KANN, ALLEN				
Street address City-St-Zip	11825 MANCHESTER ROAD ST. LOUIS, MO 63131		I A	54 / 1	
TITLE	MGRM		l (X//	M/M	
NAME STREET ADDRESS	BALDRIDGE, KENNETH R 11825 MANCHESTER ROAD		l XI	' /	
CITY-ST-ZIP	ST. LOUIS, MO 63131		′	0000727 01035	'58500 020 **700.00
NAME STREET ADDRESS					
CITY-ST-ZIP				DO NOT W	RITE
TITLE NAME		•·· •·		IN THIS SP	ACE
STREET ADORESS CITY-ST-ZIP					
TITLE					
NAME STREET ADDRESS					
CITY-ST-ZIP					
NAME					
STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the received at Image, improvered to execute this report as required by Chapter 608, Florida Statutes.					

RE AND TYPED OR PRINTED NAME OF SIGNING MANAGING PEMBER, OR AUTHORIZED REMERSENTATIVE

(KENNETH R. BALDEVOLE) 3/17/OL 314-964-2300

Dayling Phone #