2006 LIMITED LIABILITY COMPANY

FILED May 01, 2006 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # L04000071758 BAINBRIDGE DEVELOPMENT INVESTMENTS LLC Principal Place of Business Mailing Address 12791 WEST FOREST HILL BOULEVARD 12791 WEST FOREST HILL BOULEVARD SUITE 5B SUITE 58 WELLINGTON, FL 33414 WELLINGTON, FL 33414 03202006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 05-0609729 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DAVID J POWERS, P.A. DO NOT WRITE 7777 GLADES ROAD, SUITE 300 BOCA RATON, FL 33434 IN THIS SPACE 5. 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 title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee Is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE SCHECHTER, RICHARD A --NAME STREET ADDRESS 12791 W FOREST HILLS BLVD, #5-B WELLINGTON, FL 33414 CITY-ST-2)P 7171E

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DO NOT WRITE IN THIS SPACE

NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby cartily that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated do this report is true and accurate and that my signature shall have the same total effect as if made under gath, that I am a managing member or manager of the

limited liability compar	ny or the receiver or trustee empowered execute this rea	off as required by Chapter 608, F	lorida Statutes.		•	
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BIGNATINE:		Thomas J. Keady	4120106	561-333-3669		

SIGNATURE: SIGNATURE AND TIPED OF PRINTED SIGNING MAUNGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME

STREET ADORESS CUTY-ST-ZIP DELE NAME STREET ADDRESS

CITY-ST-ZIP

TITLE MAME STREET ADDRESS CATY-ST-ZIP RITLE