2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000087577 FILED 1. Entity Name BALDRIDGE-E. TRAIL, L.L.C. 06 APR 13 PH 1: 37 TALLA MASCIE, FLORIDA Principal Place of Business Mailing Address 11825 MANCHESTER ROAD 11825 MANCHESTER ROAD ST LOUIS, MO 63131 ST LOUIS, MO 63131 03142006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1965879 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PRICE, KELLY DO NOT WRITE 27200 RIVERVIEW CENTER BLVD., SUITE 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 arm familiar with, and accept the obligations of registered agent. 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 9. MANAGING MEMBERS/MANAGERS MGR TITLE BALDRIDGE, KENNETH R NAME 11825 MANCHESTER ROAD STREET ADDRESS CITY-ST-ZIP ST LOUIS, MO 63131 TITLE NAME 200072768252 04/28/06--01035--020 **700,00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP prmation supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information rue 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 the receipt or manager of the receipt or manager or man 11. I hereby certify the indicated on this

EMBER, OR AUTHORIZED-REPRESENTATIVE