2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED May 01, 2006 08:00 AN Secretary of State DOCUMENT # F9900003014 1. Entity Name BAKERS FOOTWEAR GROUP, INC. Principal Place of Business Mailing Address 2815 SCOTT AVE 2815 SCOTT AVE ST. LOUIS MO 63103 ST. LOUIS MO 63103 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State Applied For 4. FEI Number 43-0577980 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 agant and title if applicable DATE (NOTE: Registered Agent stonature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete ☐ Change 1/00000552257 NAME SPANLEY, LAWRENCE L NAME 05/15/06-80004-005 150.00 STREET ADDRESS 2815 SCOTT AVE STREET ADDRESS CITY-ST-7IP ST. LOUIS MO 63103 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME EDISON, PETER A NAME STREET ADDRESS 2815 SCOTT AVE STREET ADDRESS CITY-ST-ZIP ST. LOUIS MO 63103 CITY - ST - ZIP ☐ Delete TITLE Change Addition NAME BERGERAC, MICHELE A NAME STREET ADDRESS STREET ADDRESS 2815 SCOTT AVE CITY-ST-7P CITY-ST-ZIP SAINT LOUIS MO 63103 CEO TITLE Delete TITLE Change Andria-MARAE EDISON, PETER A NAME 2815 SCOTT AVE STREET ADDRESS STREET ADDRESS SAINT LOUIS MO 63103 CITY-ST-ZIP CITY-ST-ZIP D TITLE ☐ Delete ☐ Change MALON. BAIL, ANDREW N 2815 SCOTT AVE STREET ADDRESS STREET ADDRESS ST. LOUIS MO 63103 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Title ☐ Change ☐ AddiBer FINELY, TIMOTHY NAME 2815 SCOTT AVE STREET ADDRESS STREET ADDRESS ST. LOUIS MO 63103 CITY-ST-ZIP CITY - ST - 7IP 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