


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P18434	
1. Entity Name BRECKENRIDGE NAPLES DEVELOPMENT CORPORATION	

Principal Place of Business 221 E. LOCKWOOD AVENUE WEBSTER GROVES, MO 63119 US	Mailing Address 221 E. LOCKWOOD AVENUE WEBSTER GROVES, MO 63119 US
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DO NOT WRITE IN THIS SPACE



07072006 No Chg-P CR2E034 (11/05)

4. FEI Number 43-1416101	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

DO NOT WRITE 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 _____ U00000568663
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 07/12/06-90009-014 150.00
DATE

**FILE NOW!!! FEE IS \$150.00
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS BRECKENRIDGE, DONALD E 400 S. 14TH STREET #1001 ST. LOUIS, MO 63103
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRECKENRIDGE, DONALD E 400 S 14TH STREET, STE. 100 ST. LOUIS, MO 63103
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 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: Donald Breckenridge, Pres. 7-7-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #