
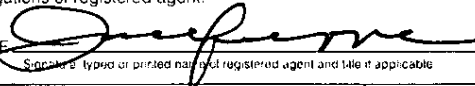
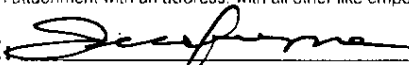


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90159 020 ***150.00

DOCUMENT # J48814 1. Entity Name BRIDGET INVESTMENT COMPANY			
Principal Place of Business 1016 CLEARWATER PL. W. PALM BEACH, FL 33401 US		Mailing Address 1016 CLEARWATER PL. W. PALM BEACH, FL 33401 US	
2. Principal Place of Business - No P.O. Box # 400 S. AUSTRALIAN AVE.		3. Mailing Address 400 S. AUSTRALIAN AVE	
Suite, Apt. #, etc. #300		Suite, Apt. #, etc. #300	
City & State WEST PALM BEACH, FL		City & State WEST PALM BEACH, FL	
Zip 33401		Zip 33401	
Country USA		Country USA	
4. FEI Number 59-2761124		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOEPEL, JOEL P. 525 SOUTH FLAGLER DRIVE SUITE 200 PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name JOEL P. KOEPEL Street Address (P.O. Box Number is Not Acceptable) 400 S. AUSTRALIAN AVE. #300 City WEST PALM BEACH FL Zip Code 33401	
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  DATE 3/18/08 <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when constituting)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KOEPEL, JOEL P. 1016 CLEARWATER PL. WEST PALM BCH., FL 33401	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KOEPEL, JOEL P. 1016 CLEARWATER PL. WEST PALM BCH., FL 33401	<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JOEL P. KOEPEL	
Date 3/18/08		Daytime Phone # 561-659-6455	