

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003594

Entity Name: BRIDGEPROS, LLC

FILED
Mar 25, 2006
Secretary of State

Current Principal Place of Business:

3770 LAUREL ST.
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

3770 LAUREL ST.
ST. AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 59-3653299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIXOM, SHANE M
3770 LAUREL STREET
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RIXOM, SHANE M
Address: 3770 LAUREL STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: MGRM () Delete
Name: BENNETT, ROBERT N
Address: 224 WEST 34TH PLACE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM () Delete
Name: BENNETT, D. SUZANNE
Address: 224 WEST 34TH PLACE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM () Delete
Name: RIXOM, MARGARET E
Address: 3770 LAUREL STREET
City-St-Zip: ST AUGUSTINE, FL 32084

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: BENNETT, ROBERT N
Address: 524 NE SIERRA WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGRM (X) Change () Addition
Name: BENNETT, D. SUZANNE
Address: 524 NE SIERRA WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHANE RIXOM

MGRM

03/25/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date