2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065101

Entity Name: BRIDGE ACQUISITION INVESTORS, LLC

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8900 BRIGHTON LANE 9077 THE LANE BONITA SPRINGS, FL 34134 NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

8900 BRIGHTON LANE 9077 THE LANE BONITA SPRINGS, FL 34134 NAPLES, FL 34109

FEI Number: 20-3094562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEYERS, AMANDA
8900 BRIGHTON LANE
BONITA SPRINGS, FL 28327 US

MEYERS, AMANDA
9077 THE LANE
NAPLES, FL 34109 US

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: AMANDA MEYERS 04/24/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 MEYERS, AMANDA
 Name:
 MEYERS, AMANDA

 Address:
 8900 BRIGHTON LANE
 Address:
 9077 THE LANE

 City-St-Zip:
 BONITA SPRINGS, FL 34134
 City-St-Zip:
 NAPLES, FL 34109

Title: MGR () Delete Title: MGR (X) Change () Addition Name: DRAGO, JOSEPH Name: DRAGO, JOSEPH

Name: DRAGO, JOSEPH Name: DRAGO, JOSEPH Address: 4559 PINEHURST GREENS CT

City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: ESTERO, FL 33928

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: AMANDA MEYERS MGR 04/24/2006