

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000359

FILED
Jul 09, 2008
Secretary of State

Entity Name: BRIDGE ASSOCIATES, LLC

Current Principal Place of Business:

747 THIRD AVE., SUITE 32-A
NEW YORK, NY 10017

New Principal Place of Business:

Current Mailing Address:

747 THIRD AVE., SUITE 32-A
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 06-1488171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHNELLING, ANTHONY
Address: 747 THIRD AVE., SUITE 32-A
City-St-Zip: NEW YORK, NY 10017

Title: MGRM () Delete
Name: YOUNG, CARL
Address: 2431 E. 61ST STREET, SUITE 260
City-St-Zip: TULSA, OK 74136

Title: MGRM () Delete
Name: STICKEL, MARK
Address: 2701 N. ROCKY POINT DRIVE, SUITE 183
City-St-Zip: TAMPA, FL 33607

Title: MGRM () Delete
Name: VOMERO, DEAN
Address: 300 WAKEFIELD RUN BLVD.
City-St-Zip: HINCLEY, OH 44233

Title: MGRM () Delete
Name: PHELPS, DAVID
Address: 912 LUTHER DRIVE
City-St-Zip: HOBART, IN 46342

Title: MGRM () Delete
Name: REIGHARD, RICHARD
Address: 250 WINDRUSH LANE
City-St-Zip: NEWPORT, VA 24128

ADDITIONS/CHANGES:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: MARK S. STICKEL

MGRM

07/09/2008

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