2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000120912

Entity Name: BRIDGES & BRIDGES, INC.

FILED Feb 11, 2007 Secretary of State

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

1501 U.S. HIGHWAY 441 NORTH **SUITE 1810** THE VILLAGES, FL 32159

New Mailing Address: Current Mailing Address:

1501 U.S. HIGHWAY 441 NORTH **SUITE 1810** THE VILLAGES, FL 32159

FEI Number: 20-1522307 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:

CYRUS, ROBERT R 214-A NORTH THIRD STREET LEESBURG, FL 34748

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BRIDGES, CLIFTON L JR. BRIDGES, CLIFTON L Name: Name:

1501 U.S. HIGHWAY 441 NORTH, SUITE 1810 1501 U.S. HIGHWAY 441 NORTH, SUITE 1810 Address: Address:

City-St-Zip: THE VILLAGES, FL 32159 City-St-Zip: THE VILLAGES, FL 32159

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

Name: BRIDGES, CLIFTON L Name: BRIDGES, ALLISON S

1501 U.S. HIGHWAY 441 NORTH, SUITE 1810 Address: 1501 U.S. HIGHWAY 441 NORTH, SUITE 1810 Address:

THE VILLAGES, FL 32159 THE VILLAGES, FL 32159 City-St-Zip: City-St-Zip:

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

BRIDGES, ALLISON S Name: Name: 1501 US HWY, 941 N. STE, 1810 Address: Address: City-St-Zip: THE VILLAGES, FL 32159 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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLISON S BRIDGES S 02/11/2007