

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120912

Entity Name: BRIDGES & BRIDGES, INC.

FILED  
Jan 24, 2009  
Secretary of State

## Current Principal Place of Business:

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

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

FEI Number: 20-1522307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

BRIDGES, ALLISON  
515 LAKESHORE DRIVE  
LEESBURG, FL 34748 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: ALLISON S. BRIDGES

01/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BRIDGES, CLIFTON L  
Address: 1501 U.S. HIGHWAY 441 NORTH, SUITE 1810  
City-St-Zip: THE VILLAGES, FL 32159

Title: S ( ) Delete  
Name: BRIDGES, ALLISON S  
Address: 1501 U.S. HIGHWAY 441 NORTH, SUITE 1810  
City-St-Zip: THE VILLAGES, FL 32159

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
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 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

SEC

01/24/2009

Electronic Signature of Signing Officer or Director

Date