


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P98000000013 |  |
| 1. Entity Name BRIDGE HOLDING COMPANY | |

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| Principal Place of Business 2401 PGA BLVD SUITE 148 PALM BEACH GARDENS, FL 33410 | Mailing Address 2401 PGA BLVD SUITE 148 PALM BEACH GARDENS, FL 33410 |
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01032007 No Chg-P CR2E034 (11/05)

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| 4. FEI Number 65-0807608 | Applied For Not Applicable |
| 5. Certificate of Status Desired | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent FRICKER, MAX 2401 PGA BLVD SUITE 148 PALM BEACH GARDENS, FL 33410 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$350.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | U00000632812 02/21/07-80037-003 158.75 |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D FRICKER, MAX 2401 PGA BLVD, STE 148 PALM BEACH GARDENS, FL 33410 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **H. Max Fricker, D** 1-18-07 (561) 625-1005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #