

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054111

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Entity Name:** PARTNERS EDGE NETWORK, LLC

**Current Principal Place of Business:**

600 SAND TREE DR.  
STE. 209  
PALM BEACH GARDENS, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

600 SAND TREE DR.  
STE. 209  
PALM BEACH GARDENS, FL 33403

**New Mailing Address:**

**FEI Number:** 20-5283754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EMPOWERED MANAGEMENT GROUP, LLC  
600 SAND TREE DR.  
STE. 209  
PALM BEACH GARDENS, FL 33403 US

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

NICHOLS, WESLEY L  
11380 PROSPERITY FARMS ROAD  
SUITE 204  
PALM BEACH GARDENS, FL 33410 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: WESLEY NICHOLS

04/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: DEMARIA, WILLIAM SR  
Address: 5157 ROBINO CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: TSC  
Name: DEMARIA, WILLIAM JR  
Address: 3800 NORTH OCEAN DRIVE #1750  
City-St-Zip: SINGER ISLAND, FL 33404

I hereby 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: WILLIAM DEMARIA

TSC

04/19/2012

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