

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**DOCUMENT # L03000021545**

1. Entity Name  
**THE EDGE, LLC**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 APR 29 PM 3:00

Principal Place of Business  
**1429 HIGHLAND DRIVE  
TALLAHASSEE, FL 32317**

Mailing Address  
**P.O. BOX 12563  
TALLAHASSEE, FL 32317**



04152005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**81-0617518**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**DICKINSON, BRENDA D  
1429 HIGHLAND DRIVE  
TALLAHASSEE, FL 32317**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
DICKINSON, BRENDA D  
1429 HIGHLAND DRIVE  
TALLAHASSEE, FL 32317**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

000054117310  
05/10/05--01001--014 \*\*50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** *Brenda D. Dickinson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*4/22/05*  
Date

*850-264-2184*  
Daytime Phone #