

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052554

FILED  
Feb 26, 2006  
Secretary of State

**Entity Name:** THE CUTTING EDGE L.L.C.

**Current Principal Place of Business:**

826 CHERRY LAUREL STREET  
MINNEOLA, FL 34715

**New Principal Place of Business:**

**Current Mailing Address:**

826 CHERRY LAUREL STREET  
MINNEOLA, FL 34715

**New Mailing Address:**

**FEI Number:** 51-0548976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWSOME, CHRIS  
826 CHERRY LAUREL STREET  
MINNEOLA, FL 34715 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NEWSOME, CHRIS  
Address: 826 CHERRY LAUREL STREET  
City-St-Zip: MINNEOLA, FL 34715

Title: MGRM ( ) Delete  
Name: TOURNE, WINDSOR  
Address: 421 EAST CENTRAL BLVD. APARTMENT 1212  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: PERRY, DOUG  
Address: 15250 JOHNS LAKE RD  
City-St-Zip: CLERMONT, FL 34711

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 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: CHRIS NEWSOME

MGR

02/26/2006

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