

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075693

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: THE FRANCHISE EDGE, LLC

## Current Principal Place of Business:

8593 W. LINEBAUGH AVE.  
TAMPA, FL 33625

## New Principal Place of Business:

## Current Mailing Address:

8593 W. LINEBAUGH AVE.  
TAMPA, FL 33625

## New Mailing Address:

FEI Number: 20-3238318

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMSON, PAUL  
618 SO. LOIS AVE.  
TAMPA, FL 33609 US

## Name and Address of New Registered Agent:

KOEHLER, KEITH W CPA  
401 NORTH HOWARD AVE  
TAMPA, FL 33606 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: KEITH KOEHLER, CPA

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SAMSON, PAUL L  
Address: 8019 N. HIMES AVENUE  
City-St-Zip: TAMPA, FL 33614

Title: MGR ( ) Delete  
Name: SAMSON, ANNETTE D  
Address: 618 SO LOIS AVE.  
City-St-Zip: TAMPA, FL 33609

Title: MGR ( ) Delete  
Name: ANDERSON, SCOTT G  
Address: 4216 WINDERLAKE DR.  
City-St-Zip: ORLANDO, FL 32835

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SAMSON, PAUL L  
Address: 8593 W. LINEBAUGH AVE.  
City-St-Zip: TAMPA, FL 33625

Title: MGR (X) Change ( ) Addition  
Name: BOWLES, JOSH  
Address: 8593 W. LINEBAUGH AVE.  
City-St-Zip: TAMPA, FL 33625

Title: MGR (X) Change ( ) Addition  
Name: ANDERSON, SCOTT G  
Address: 306 PALM STREET  
City-St-Zip: WINDERMERE, FL 34786

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 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: PAUL SAMSON

MGRM

04/30/2009

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