

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074519

Entity Name: CAPITAL EDGE, LLC

FILED
Aug 25, 2007
Secretary of State

Current Principal Place of Business:

3842 PEBBLE BROOK CIRCLE
ORANGE PARK, FL 32065

New Principal Place of Business:

Current Mailing Address:

3842 PEBBLE BROOK CIRCLE
ORANGE PARK, FL 32065

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGRM () Delete
Name: POWELL, STEPHEN
Address: 270 WEST 123RD STREET, UNIT 4-B
City-St-Zip: NEW YORK, NY 10027

Title: MGRM () Delete
Name: HARRIS, ALICEA
Address: 3044 SOUTHWALL COURT
City-St-Zip: ORANGE PARK, FL 32065

Title: MGRM () Delete
Name: DODARD, GARRY
Address: 613 ISLAND PLACE WAY
City-St-Zip: TAMPA, FL 33602

Title: MGRM () Delete
Name: BURGESS, MELISSA
Address: 613 ISLAND PLACE WAY
City-St-Zip: TAMPA, FL 33602

Title: MGRM () Delete
Name: MCNAIR, NICOLE
Address: 13908 AMBERLY CT.
City-St-Zip: BOWIE, MD 20720

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POWELL, STEPHEN
Address: 33 E. GRAND STREET #C-2A
City-St-Zip: MOUNT VERNON, NY 10552

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

Title: MGRM (X) Change () Addition
Name: DODARD, GARRY
Address: 3119 DE LEON ST
City-St-Zip: TAMPA, FL 33609

Title: MGRM (X) Change () Addition
Name: BURGESS, MELISSA
Address: 3842 PEBBLE BROOK CIRCLE
City-St-Zip: ORANGE PARK, FL 32065

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

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: NICOLE MCNAIR

MGRM

08/25/2007

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