

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004048

Entity Name: MEMBER'S EDGE, LLC

FILED
Jul 11, 2008
Secretary of State

Current Principal Place of Business:

ONE UNIVERSITY PLAZA, SUITE 307
HACKENSACK, NJ 07601

New Principal Place of Business:

Current Mailing Address:

ONE UNIVERSITY PLAZA, SUITE 307
HACKENSACK, NJ 07601

New Mailing Address:

FEI Number: 01-0635181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: JAGID, JOSHUA
Address: ONE UNIVERSITY PLAZA, SUITE 307
City-St-Zip: HACKENSACK, NJ 07601

Title: MGRM () Delete
Name: BALFOUR, JEFFREY
Address: ONE UNIVERSITY PLAZA, SUITE 307
City-St-Zip: HACKENSACK, NJ 07601

ADDITIONS/CHANGES:

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

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: J. BALFOUR

CFO

07/11/2008

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