

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035244

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: EDGE OF THE LEDGE INC.

**Current Principal Place of Business:**

1000 ROCKLEDGE DR  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

26 PARK AV  
ROCKLEDGE, FL 32955

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

GILLIARD, JEFFERY D TREASUR  
26 PARK AV  
ROCKLEDGE, FL 32955 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DONNELLY, TOM  
Address: 1000 ROCKLEDGE DR  
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP ( ) Delete  
Name: LENGYEL, MARTY  
Address: 1000 ROCKLEDGE DR  
City-St-Zip: ROCKLEDGE, FL 32955

Title: TRES ( ) Delete  
Name: GILLIARD, JEFFERY D  
Address: 1000 ROCKLEDGE DR  
City-St-Zip: ROCKLEDGE, FL 32955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFERY D GILLIARD

TRES

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date