

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000085057

Entity Name: SANBORNS EDGE, INC.

FILED
Jun 20, 2009
Secretary of State

Current Principal Place of Business:

2037 CROSSVINE LN
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 180954
CASSELBERRY, FL 32718

New Mailing Address:

FEI Number: 04-3819365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANBORN, MABLE S
2037 CROSSVINE LN
CASSELBERRY, FL 32707 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SANBORN, MABLE S
Address: 2037 CROSSVINE LN
City-St-Zip: CASSELBERRY, FL 32707

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MR () Change (X) Addition
Name: SANBORN, DENNIS L SECRETA
Address: 1000 LAKE OF THE WOODS, APT. 102A
City-St-Zip: FERN CREEK, FLORIDA, US 32730 SE

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: DENNIS L. SANBORN

SEC

06/20/2009

Electronic Signature of Signing Officer or Director

Date