

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016362

Entity Name: PCA ACQUISITIONS III, LLC

FILED
Aug 07, 2006
Secretary of State

Current Principal Place of Business:

695 RANCOCAS RD
WESTAMPTON, NJ 08060

New Principal Place of Business:

Current Mailing Address:

695 RANCOCAS RD
WESTAMPTON, NJ 08060

New Mailing Address:

FEI Number: 22-3527610 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

PHAIR, LANCE
300 NW 82ND AVENUE
SUITE500
PLANTATION, FL 33324 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: COHEN, ADAM S
Address: 695 RANCOCAS RD
City-St-Zip: WESTAMPTON, NJ 08060

Title: MGRM () Delete
Name: PHILLIPS, MATTHEW M
Address: 695 RANCOCAS RD
City-St-Zip: WESTAMPTON, NJ 08060

Title: MGRM () Delete
Name: ENDERS, HOWARD A
Address: 695 RANCOCAS RD
City-St-Zip: WESTAMPTON, NJ 08060

ADDITIONS/CHANGES:

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 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: ADAM S. COHEN

MGRN

08/07/2006

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