

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2003 8:00 am
Secretary of State

09-04-2003 90068 003 ***150.00

DOCUMENT # P00000065220

1. Entity Name
PC-ERA CONSULTING, INC.



Principal Place of Business
**473 HOLLYWOOD ST
ORMOND BEACH FL 32176**

Mailing Address
**473 HOLLYWOOD ST
ORMOND BEACH FL 32176**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3659390**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COCKRILL, ROBERT A. III
473 HOLLYWOOD ST
ORMOND BEACH FL 32176**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **COCKRILL, ROBERT A III**
STREET ADDRESS **473 HOLLYWOOD ST**
CITY-ST-ZIP **ORMOND BEACH FL 32176**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Robert A. Cockrill III**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-2-2003
Date
386-677-2613
Daytime Phone #

CR2E034 (4/03)

Attachment# 86143898
PC-ERA Consulting, Inc.

473 Hollywood St. Ormond Beach, FL 32176
Voice (386) 677-2613 / Toll Free (877) 255-6649
Web Site www.pc-era.com / e-mail - raciii@mindspring.com

**"Providing Cost Effective Solutions for PC's, Custom PC Design, Internet Connections,
Networking, and Harsh Operating Environments"**

September 2, 2003

To Whom It May Concern: Upon checking my records I have found that this form was filed the first part of February, this year with payment of \$150.00, check # 1965. Upon further checking I have found that the check has never cleared my bank. I find this highly unusual as the post office is normally very reliable.

I am resubmitting this form and re-issuing another check in the amount of \$150.00.

Thank you,

Robert A. Cockrill III, Pres.
Robert A. Cockrill III, Pres.

ROBERT A. COCKRILL III, PRES.

473 HOLLYWOOD ST.

ORMOND BEACH, FL 32176

TEL: (386) 677-2613