


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 13, 2005 8:00 am**  
**Secretary of State**

07-13-2005 90016 015 \*\*\*150.00

DOCUMENT # <b>PO 4000050544</b>	
1. Entity Name <b>FR Sales Consulting, Inc.</b>	

**DO NOT WRITE IN THIS SPACE**

**66027275**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>2727 N. Hwy A1A</b> Suite, Apt. #, etc. <b>Suite 502</b>		3. Mailing Address <b>Same</b> Suite, Apt. #, etc.	
City & State <b>INDIAN LANTIC FL</b>		City & State	
Zip <b>32903</b>	Country <b>USA</b>	Zip	Country
4. FEI Number <b>22-3900001</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name <b>Thomas Roger Hilboldt</b>
Street Address (P.O. Box Number is not acceptable) <b>5390 Wild Cinnamon Dr</b>
City <b>Melbourne</b>
State <b>FL</b>
Zip Code <b>32940</b>

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**

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$81.25**  
**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**

TITLE <b>PRESIDENT</b>	TITLE	<b>DO NOT WRITE IN THIS SPACE</b>
NAME <b>Thomas Roger Hilboldt</b>	NAME	
STREET ADDRESS <b>2727 N. Hwy A1A - unit 502</b>	STREET ADDRESS	
CITY-ST-ZIP <b>INDIAN LANTIC, FL 32903</b>	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	<b>DO NOT WRITE IN THIS SPACE</b>
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE	TITLE	<b>DO NOT WRITE IN THIS SPACE</b>
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	<b>DO NOT WRITE IN THIS SPACE</b>
CITY-ST-ZIP	CITY-ST-ZIP	
TITLE	TITLE	
NAME	NAME	
STREET ADDRESS	STREET ADDRESS	
CITY-ST-ZIP	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 on an attachment with an address with all other like empowered.

**SIGNATURE:** Thomas R. Hilboldt **8/25/05** **321-752-6992**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

ATTACHMENT

8/25/05

66027275

1) 2082

# P0400050544

I was late to file my report because the manager of the Indianapolis, IN Post Office was not having any mail delivered that did not specifically have the words apt-, unit, suite, etc. If it was just the #502 she would not deliver it.

Consequently the only reason I was late is that I never received the form, until I received the notice to dissolve.

Also, at this time I have moved to a new address:

5390 Wild Cinnamon Drive  
Melbourne, FL  
32940

Ph - 321-752-6992

Thank you for your consideration.

Sincerely

Thomas Roger Hilboldt, President  
ER Sales Consulting



ATTACHMENT

66027275

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 29, 2005

ER SALES CONSULTING, INC.  
5390 WLD CINNAMON DR  
MELBOURNE, FL 32940

SUBJECT: ER SALES CONSULTING, INC.  
Ref. Number: P04000050544

*Ch. # 1206  
dated 7-11-05  
for \$150.00  
was mailed with the  
initial application  
H. Roger Hillboldt*

Please be advised, we have received your annual report/uniform business report for the above corporation and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following:

Please accept our apology for failing to mention this in our previous letter.

There is not a registered agent designated on the report. Please enter the current registered agent's name and Florida street address. If this is a change from the registered agent previously filed with this office, the new agent must sign accepting the designation.

Due to the contents of your cover letter, we will waive the late fee or reinstatement fee for this filing. Please return your original letter along with the appropriate fees and completed annual report/reinstatement form to insure the waiver of these additional fees.

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tina Roberts  
Document Specialist

Letter Number: 505A00054367