

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000062374

FILED
Mar 09, 2005
Secretary of State

Entity Name: COMPUTER RESOURCE CENTER, INC.

Current Principal Place of Business:

327 DAHLONEGA HWY
#401
CUMMING, GA 30040 US

New Principal Place of Business:

Current Mailing Address:

562 LAKELAND PLAZA
#249
CUMMING, GA 30040 US

New Mailing Address:

327 DAHLONEGA ST.
#401
CUMMING, GA 30040 US

FEI Number: 59-3204689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UCC FILING & SEARCH SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PS () Delete
Name: GERACE, ROBERT F.
Address: 562 LAKELAND PLAZA #249
City-St-Zip: CUMMING, GA 30040

Title: EVP () Delete
Name: GERACE, DEBRA J.
Address: 562 LAKELAND PLAZA #249
City-St-Zip: CUMMING, GA 30040

Title: VP () Delete
Name: WARFORD, RICHARD
Address: 562 LAKELAND PLAZA #249
City-St-Zip: CUMMING, GA 30040

Title: VP () Delete
Name: PERRY, KARY T
Address: 562 LAKELAND PLAZA #249
City-St-Zip: CUMMING, GA 30040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: GERACE, ROBERT F.
Address: 327 DAHLONEGA ST, #401
City-St-Zip: CUMMING, GA 30040

Title: EVP (X) Change () Addition
Name: GERACE, DEBRA J.
Address: 327 DAHLONEGA ST, #401
City-St-Zip: CUMMING, GA 30040

Title: VP (X) Change () Addition
Name: WARFORD, RICHARD
Address: 327 DAHLONEGA ST., #401
City-St-Zip: CUMMING, GA 30040

Title: VP (X) Change () Addition
Name: PERRY, KARY J
Address: 327 DAHLONEGA ST., #401
City-St-Zip: CUMMING, GA 30040

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEBRA J. GERACE

VP

03/09/2005

Electronic Signature of Signing Officer or Director

_____ Date