

CCR Registration

Not to be used as certifications and representations. See [ORCA](#) for official certification.

Registration Status: Active in CCR; Registration valid until 08/22/2012.

DUNS: 962731373

DUNS PLUS4:

CAGE/NCAGE: 621F1

Legal Business Name: BOBCAT ENTERPRISES, LLC

Doing Business As (DBA): JMAR PROTOCOL TRAINING & CONSULTING

TIN/EIN: 272790209

SSN:

Division Name:

Division Number:

Company URL:

Physical Street Address 1: 2767 SUN VALLEY DR

Physical Street Address 2:

Physical City: WALDORF

Physical State: MD

Physical Foreign Province:

Physical Zip/Postal Code: 20603-3998

Physical Country: USA

Mailing Name: JAMAR PROTOCOL TRAINING & CONSULTING

Mailing Street Address 1: 2767 SUN VALLEY DR

Mailing Street Address 2:

Mailing City: WALDORF

Mailing State: MD

Mailing Foreign Province:

Mailing Zip/Postal Code: 20603-3998

Mailing Country: USA

Business Start Date: 05/25/2010

Delinquent Federal Debt: No

Fiscal Year End Date: 12/31

Number of Employees for This Location: 0

Number of Employees for All Affiliates: 0

Annual Receipts for This Location: \$120

Annual Receipts for All Affiliates: \$120

Company Security Level:

Highest Employee Security Level:

DUN & BRADSTREET LINKAGE

This information comes from Dun & Bradstreet and is not editable by CCR users.

You may contact D&B Customer Service at 1-866-705-5711 (U.S. only) or govt@dnb.com (US and International) to verify your company name, physical address, or parent information in their system.

DUNS: 962731373

Linkage Info Date:

Headquarters Parent POC

DUNS:
Name:
Address:
City:
State:
Zip/Postal Code:
Country:
Phone:

Global Ultimate POC

DUNS:
Name:
Address:
City:
State:
Zip/Postal Code:
Country:

Domestic Ultimate POC

DUNS:
Name:
Address:
City:
State:
Foreign Province:
Zip/Postal Code:
Country:

CORPORATE INFORMATION

Type of Organization

Sole Proprietorship

Business Types/Grants

A5 - Veteran Owned Business
 LJ - Limited Liability Company
 QF - Service Disabled Veteran Owned Business
 VN - Contracts
 2X - For-Profit Organization

Sole Proprietorship POC

Name: G ROBERT HENRY/CATHEY M HENRY
Email Address: a688rider@verison.net
U.S. Phone: 301-920-4301
Non-U.S. Phone:
Fax:

DISASTER RESPONSE INFORMATION

Bonding Levels

**Construction Bonding Level, Per Contract
(dollars):**

**Construction Bonding Level, Aggregate
(dollars):**

Service Bonding Level, Per Contract (dollars):

Service Bonding Level, Aggregate (dollars):

Geographic Areas Served

No geographic areas specified

GOODS / SERVICES**North American Industry Classification System (NAICS)**

541613 - Marketing Consulting Services

611430 - Professional and Management Development Training

Product Service Codes (PSC)

Federal Supply Classification (FSC)

SMALL BUSINESS TYPES

SDB, 8A and HubZone certifications come from the Small Business Administration and are not editable by CCR vendors.

Business Types Expiration Date

North American Industry Classification System (NAICS)

The small business size status is derived from the receipts, number of employees, assets, barrels of oil, and/or megawatt hours entered by the vendor during the registration process.

NAICS Code	Description	Small Business	Emerging Small Business
541613	Marketing Consulting Services	Yes	No
611430	Professional and Management Development Training	Yes	No

FINANCIAL INFORMATION**Electronic Funds Transfer (EFT)**

Financial Institution: BRANCH BANK & TRUST-
MARYLAND

ABA Routing Number: 055003308

Account Number: 0005156714277

Account Type: Checking

Lockbox Number:

Automated Clearing House (ACH)

U.S. Phone: 800-774-8179

Non-U.S. Phone:

Fax:

Email Address:

Authorization 08/22/2011
Date:

Remittance Information

Name: JMAR PROTOCOL TRAINING & CONSULTING
Address Line 1: 2767 SUN VALLEY DR
Address Line 2:
City: WALDORF
State: MD
Foreign Province:
Zip/Postal Code: 20603-3998
Country: USA

Accounts Receivable POC

Name: G ROBERT HENRY
Email Address: a688rider@verizon.net
U.S. Phone: 301-920-4301
Non-U.S. Phone:
Fax:

Accepts credit cards as a method of payment: Yes

CCR POINTS OF CONTACT

CCR Primary POC (Registrant Name)

Name: G ROBERT HENRY
Email Address: a688rider@verizon.net
U.S. Phone: 301-920-4301
Non-U.S. Phone:
Fax:

CCR Alternate POC

Name: CATHEY M HENRY
Email Address: party_lady30@hotmail.com
U.S. Phone: 301-920-4301
Non-U.S. Phone:
Fax:

Government Business Primary POC

Name: CATHEY M HENRY
Email Address: party_lady30@hotmail.com
Address Line 1: 2767 SUN VALLEY DR
Address Line 2:
City: WALDORF
State: MD
Foreign Province:
Zip/Postal Code: 20603-3998
Country: USA
U.S. Phone: 301-920-4301
Non-U.S. Phone:
Fax: 301-885-0320

Government Business Alternate POC

Name: G ROBERT HENRY
Email Address: a688rider@verizon.net
Address Line 1: 2767 SUN VALLEY DR
Address Line 2:
City: WALDORF
State: MD
Foreign Province:
Zip/Postal Code: 20603-3998
Country: USA
U.S. Phone: 301-920-4301
Non-U.S. Phone:
Fax: 301-885-0320

Past Performance Primary POC

Name:
Email Address:
Address Line 1:
Address Line 2:
City:
State:
Foreign Province:
Zip/Postal Code:
Country:
U.S. Phone:

Past Performance Alternate POC

Name:
Email Address:
Address Line 1:
Address Line 2:
City:
State:
Foreign Province:
Zip/Postal Code:
Country:
U.S. Phone:

Non-U.S. Phone:**Fax:****Electronic Business Primary POC****Name:** G ROBERT HENRY**Email Address:** a688rider@verizon.net**Address Line 1:** 2767 SUN VALLEY DR**Address Line 2:****City:** WALDORF**State:** MD**Foreign Province:****Zip/Postal Code:** 20603-3998**Country:** USA**U.S. Phone:** 301-920-4301**Non-U.S. Phone:****Fax:** 301-885-0320**Non-U.S. Phone:****Fax:****Electronic Business Alternate POC****Name:** CATHEY M HENRY**Email Address:** party_lady30@hatmail.com**Address Line 1:** 2767 SUN VALLEY DR**Address Line 2:****City:** WALDORF**State:** MD**Foreign Province:****Zip/Postal Code:** 20603-3998**Country:** USA**U.S. Phone:** 301-920-4302**Non-U.S. Phone:****Fax:** 301-885-0320**Previous Business Name****Name:****Address Line 1:****Address Line 2:****City:****State:****Foreign Province:****Zip/Postal Code:****Country:****Government Parent****Name:****Address Line 1:****Address Line 2:****City:****State:****Foreign Province:****Zip/Postal Code:****Country:****Corporate POC****Name:****Email Address:****U.S. Phone:****Non-U.S. Phone:****Fax:****Marketing Partner Identification Number (MPIN)****MPIN:** subman688**EDI****Value Added Network:****Interchange ID (ISA) Qualifier:****Interchange Sender ID (ISA) Qualifier:****Functional Group (GS02) Identifier:****EDI POC****Name:****Email Address:****U.S. Phone:****Non-U.S. Phone:****Fax:**

Receive Remittance Advice Notices (820's) through their VAN provider: ---