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**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A01000000525

1. Entity Name

PINNACLE VILLAGE, LTD.

FILED

02 OCT -3 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9400 S. Dadeland Blvd.

3. Mailing Address

9400 S. Dadeland Blvd.

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

Suite 100

DUE BY MAY 1

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

33156

Country

USA

Zip

33156

Country

USA

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Brian J. McDonough

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

2200 Museum Tower

150 West Flagler Street

City
Miami

FL

Zip Code
33130

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.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and title if applicable

DATE

9. Capital Contributions
as Shown on record.

99.99

10. Amount of Capital Contributions
in FLORIDA to date.

99.99

11. **MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # P01000039311
NAME PHG - Deerfield, Inc.
STREET ADDRESS 9400 S. Dadeland Blvd., Suite 100
CITY-ST-ZIP Miami, Florida 33156

STREET ADDRESS

CITY-ST-ZIP

700008179277-5

DOCUMENT #
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CITY-ST-ZIP

10/3 US

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

[Signature]

10/02/02 (305) 854-7100

CR2E003B (12/01)



ACCOUNT NO. : 072100000032

REFERENCE : 769168 4311473

AUTHORIZATION :

COST LIMIT : \$ 550.00

ORDER DATE : October 3, 2002

ORDER TIME : 11:17 AM

ORDER NO. : 769168-015

CUSTOMER NO: 4311473

CUSTOMER: Jackie Gerstenfeld, Paralegal
Stearns Weaver Miller Weissler
Museum Tower, Suite 2200
150 West Flagler Street
Miami, FL 33130

FILED
02 OCT -3 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: PINNACLE VILLAGE, LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull-EXT#1115

EXAMINER'S INITIALS: _____

RECEIVED
02 OCT -3 AM 11:49
DIVISION OF CORPORATION