

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90087 013 ***150.00

DOCUMENT # F97000004832

1. Entity Name
PINNACLE REAL ESTATE TAX SERVICES, INC.

Principal Place of Business 395 OYSTER POINT BLVD., STE. 500 S. SAN FRANCISCO CA 94080	Mailing Address 395 OYSTER POINT BLVD., STE. 500 S. SAN FRANCISCO CA 94080
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 8435 Stemmons Freeway	3. Mailing Address 150 2nd Ave. North
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite 1600
City & State Dallas, TX	City & State St. Petersburg, FL
Zip 75247	Country USA
Country USA	Zip 33701
Country USA	Country USA

4. FEI Number 94-3280626	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back.)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YAVORSKY, DAVID C 8435 STEMMONS FREEWAY DALLAS TX 75247	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GIAMMARIO, GREGORY J 8435 STEMMONS FREEWAY DALLAS TX 75247	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MACCARRON, JEFFREY A 8435 STEMMONS FREEWAY DALLAS TX 75247	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHOENING, ALLISON 8435 STEMMONS FREEWAY DALLAS TX 75247	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDO, BARRY 8435 STEMMONS FREEWAY DALLAS TX 75247	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO LAMSON, JOHN C 150 SECOND AVENUE NORTH, STE. 1600 ST. PETERSBURG FL 33701	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY CRAIG J. ZINDA 150 2nd Ave. North, Suite 1600 St. Petersburg, FL 33701	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Craig J. Zinda April 19, 2000 (727) 895-4915

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)