


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90450 043 *****55.00

DOCUMENT # L00000001385			
1. Entity Name PINNACLE VACATION HOMES, LLC			
Principal Place of Business 5260 WEST IRLO BRONSON HIGHWAY, STE. 115 KISSIMMEE, FL 34746		Mailing Address 5260 WEST IRLO BRONSON HIGHWAY, STE. 115 KISSIMMEE, FL 34746	
2. Principal Place of Business 1104 Golden Aster Court		3. Mailing Address 1104 Golden Aster Court	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Celebration Florida		City & State Celebration Florida	
Zip 34747	Country USA	Zip 34747	Country USA

24049719



04162004 Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3622673		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 CORAL WAY, 4TH FLOOR MIAMI, FL 33145		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILL, GARRY 417 WATER ST. CELEBRATION, FL 34747 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILL, GARRY 1104 GOLDEN ASTER COURT CELEBRATION, FL 34747 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL, PATRICIA 417 WATER ST. CELEBRATION, FL 34747 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL, PATRICIA 1104 GOLDEN ASTER COURT CELEBRATION, FL 34747 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Garry E. Hill* APRIL 19 2004 407 390 7468

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #