

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011025

Entity Name: PINNACLE VENTURE, LLC

FILED  
May 08, 2007  
Secretary of State

**Current Principal Place of Business:**

2449 FALLEN TREE DRIVE E  
JACKSONVILLE, FL 32246

**New Principal Place of Business:**

**Current Mailing Address:**

2449 FALLEN TREE DRIVE E  
JACKSONVILLE, FL 32246

**New Mailing Address:**

FEI Number: 59-3731424      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

SAVAGE, HOWARD W II  
2449 FALLEN TREE DRIVE E  
JACKSONVILLE, FL 32246    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

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:            SAVAGE, HOWARD W II  
Address:        2449 FALLEN TREE DRIVE E  
City-St-Zip:    JACKSONVILLE, FL 32246

**ADDITIONS/CHANGES:**

Title:            ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HOWARD W. SAVAGE II

PRES

05/08/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date