2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 08:00 AM
Secretary of State

DOCUMENT # **N14926**

1. Entity Name
PINNACLE PLAZA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9021 TOWN CENTRE PARKWAY	9021 TOWN CENTRE PARKWAY
BRADENTON FL 34202 US	BRADENTON FL 34202 US

2. Principal Place of Business	3. Mailing Address
9021 TOWN CENTER PARKWAY	9021 TOWN CENTER PARKWAY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: BRADENTON FL	City & State: BRADENTON FL
Zip: 34202 Country: US	Zip: 34202 Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0173800** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GRAUS KIMBERLY L
9021 TOWN CENTER PKWY
BRADENTON FL
34202 US

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 _____ **04/18/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Change ☐ Addition
TITLE	AS	☐ Delete	TITLE	AS	☒ Change ☐ Addition
NAME	GRAUS KIMBERLY L		NAME	GRAUS KIMBERLY L	
STREET ADDRESS	351-6TH AVENUE WEST		STREET ADDRESS	9021 TOWN CENTER PKWY	
CITY-ST-ZIP	BRADENTON FL		CITY-ST-ZIP	BRADENTON FL 34202	
TITLE	VD	☐ Delete	TITLE	VD	☒ Change ☐ Addition
NAME	EDMONDSON LOUIS E		NAME	EDMONDSON LOUIS E	
STREET ADDRESS	351-6TH AVENUE WEST		STREET ADDRESS	9021 TOWN CENTER PKWY	
CITY-ST-ZIP	BRADENTON FL		CITY-ST-ZIP	BRADENTON FL 34202	
TITLE	VST	☐ Delete	TITLE	VST	☒ Change ☐ Addition
NAME	DOYLE MICHAEL J		NAME	DOYLE MICHAEL J	
STREET ADDRESS	351-6TH AVENUE WEST		STREET ADDRESS	9021 TOWN CENTER PKWY	
CITY-ST-ZIP	BRADENTON FL		CITY-ST-ZIP	BRADENTON FL 34202	
TITLE	PD	☐ Delete	TITLE	PD	☒ Change ☐ Addition
NAME	NEWSOME JOHN S		NAME	NEWSOME JOHN S	
STREET ADDRESS	351-6TH AVE WEST		STREET ADDRESS	9021 TOWN CENTER PKWY	
CITY-ST-ZIP	BRADENTON FL		CITY-ST-ZIP	BRADENTON FL 34202	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E037 (11/00)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIMBERLY L. GRAUS AS 04/18/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #