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May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N-28856

1. Corporation Name
PINNACLE HOMEOWNERS ASSOCIATION, INC

Principal Place of Business	Mailing Address

2. Principal Place of Business	2a. Mailing Address
21 2804 TITLEIST W	26 2804 TITLEIST LN
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 CRESTVIEW FL	City & State 28 CRESTVIEW FL
Zip 24 32539 Country 25	Zip 29 32539 Country 30

3. Date Incorporated or Qualified ?

3a. Date of Last Report 02-96

4. FEI Number 593031026 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
	81 Name: WILLIAM R. DONOHO
	82 Street Address (P.O. Box Number is Not Acceptable): 2804 TITLEIST LANE
	83
	84 City: CRESTVIEW FL 85 Zip Code: 32539

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [signature] WILLIAM R. DONOHO, PRESIDENT 4-1-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P, D WILLIAM R. DONOHO 2804 TITLEIST LANE CRESTVIEW, FL, 32539-8335	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	V, D AUDREY B. EDWARDS 1811 CHRISTY DRIVE NICEVILLE, FL, 32588-0220	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S, D JAMES G. GIFFARD 4568 TOP FLIGHT DRIVE CRESTVIEW, FL 32539-8335	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	T KEVIN T. BRADLEY 4573 TOP FLIGHT DRIVE CRESTVIEW, FL, 32539-8335	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	T PAUL CASSIDY 306 SHOAL RIVER DR. CRESTVIEW, FL 32539	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	100002190362 -05/23/97--01109--032 ***61.25 CS 5/14/97	☐ Change ☐ Addition

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] WILLIAM R DONOHO 4-1-97 904-689-8824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #