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Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **N28856** **(5)**

1. Corporation Name
PINNACLE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2804 TITLEIST LANE CRESTVIEW FL 32539 US	2804 TITLEIST LANE CRESTVIEW FL 32539 US

3. Date Incorporated or Qualified: 10/13/1988

4. FEI Number: 59-3031026 ☐ 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

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 2802 TITLEIST CANE	26 2802 Titleist LN
22 Suite, Apt. #, etc	27 Suite, Apt. #, etc.
23 Crestview, FL	28 Crestview FL
24 Zip 32539 / 25 Country US	29 Zip 32539 / 30 Country US

9. Name and Address of Current Registered Agent

DONOHO, WILLIAM R
2804 TITLEIST LANE
CRESTVIEW FL 32539

10. Name and Address of New Registered Agent

81 Name: SCOTT SIMONEAUX
82 Street Address (P.O. Box Number is Not Acceptable): 2802 TITLEIST LN.
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: Scott Simoneaux — Scott Simoneaux — 4/6/98
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	PD	☐ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	DONOHO, WILLIAM R		1.2 NAME	SCOTT SIMONEAUX	
STREET ADDRESS	2804 TITLEIST LANE		1.3 STREET ADDRESS	2802 TITLEIST LN.	
CITY-ST-ZIP	CRESTVIEW FL 32539		1.4 CITY-ST-ZIP	CRESTVIEW, FL 32539	
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	EDWARDS, AUDREY B.		2.2 NAME		
STREET ADDRESS	1011 CHRISTY DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	NICEVILLE FL		2.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	GIFFARD, JAMES G		3.2 NAME	PAUL BROWNING	
STREET ADDRESS	4568 TOP FLIGHT DR		3.3 STREET ADDRESS	4617 TOP FLIGHT DR.	
CITY-ST-ZIP	CRESTVIEW FL		3.4 CITY-ST-ZIP	CRESTVIEW, FL 32539	
TITLE	T	☐ DELETE	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	BRADLEY, KEVINRT T		4.2 NAME	PEYTON GREENE	
STREET ADDRESS	4573 TOP FLIGHT DRIVE		4.3 STREET ADDRESS	2805 TITLEIST LN.	
CITY-ST-ZIP	CRESTVIEW FL 32539-6335		4.4 CITY-ST-ZIP	CRESTVIEW, FL 32539	
TITLE	T	☐ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	CASSIDY, PAUL		5.2 NAME	ELIZABETH MARTIN	
STREET ADDRESS	306 SHRAL RIVER DR		5.3 STREET ADDRESS	4593 TOP FLIGHT DR.	
CITY-ST-ZIP	CRESTVIEW FL 32539		5.4 CITY-ST-ZIP	CRESTVIEW, FL 32539	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. 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 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: Scott Simoneaux — Scott Simoneaux — 4/6/98