2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N28856 1. Entity Name PINNACLE HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business 2802 PINE LANE CRESTVIEW FL 32539 US 2. Principal Place of Business 4595 Top Flight Nove Round Round

FILED Apr 16, 2001 8:00 am Secretary of State

04-16-2001 90003 028 ****61.25



DO NOT WRITE IN THIS SPACE

								
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6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
	o. Maine and Addison of Contain	iogiotere - i gent	Name	Name Occasion Name				
				Mary Ann Lepper				
MITCHELL, JUANA S			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
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CRESTVIEW FL 32539				4595 Top Flight Drive				
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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.								
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SIGNATURE Signature, typed of printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
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		this filing does not qualify for the	L	ed in Section 119.07	(3)(i) Florida Statutes I further cer	rtify that the ir	nformation	
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 office or of creating the control of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal effect as if made under oath; that I am an office or of legal of the same legal								
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:

Government (850)

Out 6,01 683-0068

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