2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057119

Entity Name: PINNACLE PIZZA, INC.

FILED May 01, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

DPST

HAVENER, JONATHAN A

Current Principal Place of Business: New Principal Place of Business:

D/B/A/ DOMINO'S PIZZA D/B/A/ DOMINO'S PIZZA 325 RIUNITE CIR 1269 QUAIL WALK DR

WINTER SPRINGS, FL 32708 ALTAMONTE SPRINGS, FL 32714

New Mailing Address: **Current Mailing Address:**

D/B/A/ DOMINO'S PIZZA D/B/A/ DOMINO'S PIZZA 1269 QUAIL WALK DR PO BOX 195818

WINTER SPRINGS, FL 32719 ALTAMONTE SPRINGS, FL 32714

FEI Number: 20-0024234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HAVENER, JONATHAN A HAVENER, JONATHAN A 325 RIUNITE CR 1269 QUAIL WALK DRIVE

WINTER SPRINGS, FL 32708 US ALTAMONTE SPRINGS, FL 32708 US

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: 05/01/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: HAVENER, JONATHAN A Name: Name:

325 RIUNITE CR Address: 1269 QUAIL WALK DRIVE Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DV Title: () Change () Addition () Delete GRIEG, TOM Name: Name:

19630 LANSHELL DR Address: Address: FT MYERS, FL 33917 City-St-Zip: 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 or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JONATHAN A HAVENER **DPST** 05/01/2007