2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2001 8:00 am
Secretary of State
04-05-2001 90002 003 ****61.25

0059104

DOCUMENT # 736382

1. Entity Name

THE PINNACLE APARTMENTS, INC. A CONDOMINIUM

Principal Place of Business	Mailing Address
4141 BAYSHORE BLVD TAMPA FL 33611	4141 BAYSHORE BLVD TAMPA FL 33611

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1672769 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

PIONEER WESTERN FINANCIAL CORPORATION
D/B/A CONDOMINIUM ASSOCIATES
30001 EXECUTIVE DR #260
CLEARWATER FL 33762

7. Name and Address of New Registered Agent

Name: Eddy Hauer III
Street Address (P.O. Box Number is Not Acceptable): 4141 Bayshore Blvd
City: Tampa FL Zip Code: 33611

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: Eddy G. Hauer III — 04-02-01
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	TD SIMMONS, WILLIAM G 4141 BAYSHORE BLVD #1205 TAMPA FL 33611	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GRIMALDI, ANTHONY 4141 BAYSHORE BLVD #2002 TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FRITZ EICHELBERGER 4141 BAYSHORE BLVD #501 TAMPA, FL 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EICHELBERGER, FRITZ 4141 BAYSHORE BLVD #501 TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARY PROVENZANO 4141 BAYSHORE BLVD #1404 TAMPA, FL 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SCHWARTZ, GLADYS 4141 BAYSHORE BLVD., #601 TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ELIZABETH SHALETT 4141 BAYSHORE BLVD #1601 TAMPA, FL 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEEP, JANE 4141 BAYSHORE BLVD #1902 TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ENRIQUE VALCARCE 4141 BAYSHORE BLVD #306 TAMPA, FL 33611	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VELASQUEZ, ALEC 4141 BAYSHORE BLVD #1104 TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD	☒ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED — 4-2-01 — 813 8373333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #