

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000001619**

1. Entity Name

**PINNACLE SOUTHEAST, LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR 28 AM 3:05

Principal Place of Business

% PINNACLE TOWERS, INC.  
1549 RINGLING BLVD., THIRD FL.  
SARASOTA FL 34236

Mailing Address

% PINNACLE TOWERS, INC.  
1549 RINGLING BLVD., THIRD FL.  
SARASOTA FL 34236-6764



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-3459138**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WILLIAMS, LEWIS D**  
**1 INDEPENDENT DRIVE, SUITE 1600**  
**JACKSONVILLE FL 32202-5009**

7. Name and Address of New Registered Agent

Name

**DECKER A. TODD**

Street Address (P.O. Box Number is Not Acceptable)

**PINNACLE TOWERS, INC.**

**1549 RINGLING BLVD, 3RD FL**

City

**SARASOTA**

FL

Zip Code

**34236**

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

*Decker A. Todd*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**4/20/00**

DATE

9. Capital Contributions  
as Shown on record.

**\$8,800,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$8,800,000**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **F97000005858**  
NAME **PINNACLE TOWERS II INC.**  
STREET ADDRESS **1549 RINGLING BLVD THIRD FLOOR**  
CITY - ST - ZIP **SARASOTA FL 34236**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

**200003268602--2**

**05/26/00 01078 019**

STREET ADDRESS

**\*\*\*\*\*526.25 \*\*\*\*\*526.25**

CITY - ST - ZIP

DOCUMENT #  
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CITY - ST - ZIP

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**DECKER A. TODD**

**4/20/00 (941) 364-8886**

Date

Daytime Phone #