## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 05, 2002 8:00 am Secretary of State DOCUMENT # F01000000807 1. Entity Name PINNACLE ENGINEERING, INC. 05-05-2002 90307 046 \*\*\*150.00 Principal Place of Business Mailing Address 2100 RIVERCHASE CENTER, STE 218 2100 RIVERCHASE CENTER. STE 218 **ບບບບບ** BIRMINGHAM, AL 35244 BIRMINGHAM AL 35244 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 63-1262829 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 City Zip Code 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: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE **X** Addition NAME CINGORANELLI, D. JIM NAME STREET ADDRESS 2366 MOUNTAIN OAKS LANE STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP TITLE CD ☐ Delete TITLE NAME REDDINGTON, MICHAEL J NAME STREET ADDRESS 3101 HUNTINGTON WAY STREET ADDRESS CITY-ST-ZIP BIRMINGHAM AL CITY-ST-ZIP 35216 ☐ Delete Addition NAME HOGLAND, JAMES M NAME STREET ADDRESS 130 BEACH CIRCLE STREET ADDRESS CITY-ST-ZIP **BIRMINGHAM AL** CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

MICHAEL J. REDDINGTON