2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G46735

FILED
May 18, 2000 8:00 am
Secretary of State
05-18-2000 90312 029 ***150.00

1. Entity Name

PINNACLE PORT REALTY CORPORATION

Principal Place of Business	Mailing Address
C/O RAMONA GARVIN 23223 FRONT BEACH RD. PANAMA CITY BEACH FL 32413-1008	C/O RAMONA GARVIN 23223 FRONT BEACH RD. PANAMA CITY BEACH FL 32413-1008

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 59-2307975 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NICHOLS, SANDRA F. 8 MIRACLE STRIP PKWY FT WALTON BCH FL 32549	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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 Sandra F. Nichols 5/1/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WHITFIELD, WINSTON 2105 PROPER ST CORINTH MS 38834	☐ Delete	Director Whitfield, Winston	XXX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S APPLEGATE, BOYD 3240 GULF COAST DR HERNANDO BEACH FL	XXX ☐ Delete	Director Long, James 23223 Front Beach Road A-905 Panama City Beach, FL 32413	☐ Change XXXX ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PST NICHOLS, SANDI 8 MIRACLE STRIP PKWY FT WALTON BCH FL 32549	☐ Delete	Director Cotter, Jack 1609 Crittenden Lane Lawrenceville, GA 30043	☐ Change XXXX ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KIRKLAND, MARYBETH 23223 FRONT BEACH RD B3-505 PANAMA CITY BEACH FL	☐ Delete	Vice President Courturier, Richard 315 Chase Lane Marietta, GA 30068	☐ Change XXX ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COLQUITT, WILLIAM PO BOX 6007 N/A COLUMBUS GA 31907	☐ Delete	Director Ringer, Mertice 3058 Fifth Street Marianna, FL 32446	☐ Change XXX ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T REID, ROBERT 6024 COOK RD MILFORD OH 45150	☐ Delete		☐ Change ☐ Addition

CR2E034 (9/99)

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.

SIGNATURE: James W. Long 5/1/00 850 234 9994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #