2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2001 8:00 am Secretary of State **DOCUMENT # G46735** 1. Entity Name PINNACLE PORT REALTY CORPORATION 04-30-2001 90410 045 ***150.00 Mailing Address Principal Place of Business C/O RAMONA GARVIN C/O RAMONA GARVIN 23223 FRONT BEACH RD. 23223 FRONT BEACH RD. PANAMA CITY BEACH FL 32413-1008 PANAMA CITY BEACH FL 32413-1008 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number City & State 59-2307975 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired _____ 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NICHOLS, SANDRA F. 8 MIRACLE STRIP PKWY FT WALTON BCH FL 32549 Rosa Beach 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE **X** Delete TITLE WHITFIELD, WINSTON NAME NAME STREET ADDRESS 2105 PROPER ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORINTH MS 38834 DIRECTOR ☐ Addition Change : ☐ Delete TITLE TITLE LONG. JAMES NAME NAME STREET ADDRESS STREET ADDRESS 23223 FRONT BEACH RD -905 CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL 32413 PRESIDENT, SECRETARY, TRES. - Change TITLE PST X Delete TITLE raymond n, robins NAME NICHOLS, SANDI NAME 4193 W. C-30A STREET ADDRESS STREET ADDRESS 8 MIRACLE STRIP PKWY CITY-ST-ZIP SANTA ROSA BEACH, FL CITY-ST-ZIP FT WALTON BCH FL 32549 DIRECTOR ☐ Addition □ Delete TITLE NAME KIRKLAND, MARYBETH NAME STREET ADDRESS STREET ADDRESS 23223 FRONT BEACH RD B3-505 CITY-ST-7IP CITY-ST-ZiP PANAMA CITY BEACH FL VICE PRESIDENT ☐ Delete TITLE ☐ Addition TITLE COLQUITT, WILLIAM NAME NAME STREET ADDRESS STREET ADDRESS PO BOX 6007 N/A CITY-ST-ZIP CITY-ST-7IP **COLUMBUS GA 31907** DIRECTOR TITLE ☐ Delete TITLE Change Addition REID. ROBERT NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

6024 COOK RD

MILFORD OH 45150

STREET ADDRESS

CITY-ST-ZIP