

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90036 043 ***150.00

DOCUMENT # G46735 1. Entity Name PINNACLE PORT REALTY CORPORATION					
Principal Place of Business 23223 FRONT BEACH RD. PANAMA CITY BEACH, FL 32413-1008			Mailing Address 23223 FRONT BEACH RD. PANAMA CITY BEACH, FL 32413-1008		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2307975	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JONES, JANET R 23223 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HILKMAN, MARK 4189 LOCH HIGHLAND PKWY ROSWELL, GA 30075		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William Colquitt 4916 TURNBERRY LANE Columbus, GA 31909	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JONES, JANET R 23223 FRONT BEACH RD PANAMA CITY BEACH, FL 32413		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRY HALL 999 Ector Chase NW KENNESAW GA 30152	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REID, ROBERT 6024 COOK DR MILFORD, OH 45150		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kyle Oakes 4610 Highway 62 VINCENT AL 35178	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WILLIS, JACK P.O. BOX 1032 WAYNESBORO, GA 30830		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman CAS Robinson 528 Montegale TRACE STONE MOUNTAIN GA 30087	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HOUSER, JOHN 615 RED MAPLE LANE ALPHARETTA, GA 30004		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LARRY Bowen 324 W LIVE OAK Circle Thomasville GA 31792	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAY, JOYCE 9123 THORNTON BLVD JONESBORO, GA 30238		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Janet R. Jones</i> President			3/5/08 850 234-2827		