


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000016549</b> 1. Entity Name <b>PINNACLE PRIME PROPERTIES, LLC</b>	
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Principal Place of Business  
231 W. MINNESOTA AVE.  
DELAND, FL 32720

Mailing Address  
231 W. MINNESOTA AVE.  
DELAND, FL 32720



01132006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>90-0155043</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

FOGLE & FIEDLER, P.A.  
% TIMOTHY R. FIEDLER, ESQ.  
217 E. PLYMOUTH AVE.  
DELAND, FL 32724

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	LANE, FRED
STREET ADDRESS	231 W. MINNESOTA AVE.
CITY-ST-ZIP	DELAND, FL 32720

TITLE	MGRM
NAME	LANE, PATRICIA
STREET ADDRESS	231 W. MINNESOTA AVE.
CITY-ST-ZIP	DELAND, FL 32720

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/20/06-80032-014 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** Patricia S. Lane Patricia S. Lane 1/13/06 386-736-1660  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #