## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jul 29, 2004 8:00 am Secretary of State

DOCUMENT # L0300001342  1. Entity Name PINNACLE REAL ESTATE HOLDINGS, LLC							<b>: retar</b> 29-2004 900	•	
Principal Place of Business 4110 MANATEE AVENUE WEST BRADENTON, FL 34205			Mailing Address 7252 MANATEE AVENUE BRADENTON, FL 34209			34009586			
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			07202004 Chg-LLC	CR2E	(10/03)	
City & State			City & State			4. FEI Number 45 - 05/5	144	<u> </u>	pplied For
Zip	Į	Country Zip		Country		5. Certificate of Status Des		\$5.00 Add	litional
	6. Name	and Address of Current R	egistered Agent	Istered Agent Name		7. Name and Address of	New Registered	•	
QUINLAN, 601 12TH S BRADENT	STREET	NEST				P.O. Box Number is Not Acce	eptable)		
ليفض د 8			الرابوس بالاستياد ومحدد الاستعلا		City	<u> </u>	F	Zip Cod	e
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									
Fil Due b				, , , , , , , , , , , , , , , , , , ,	Make check Iorida Departr	7 7 1			
9. TITLE	MGR	MANAGING MEMBER	S/MANAGERS  Delete	10.	·	ADDIT	IONS/CHANGE		
NAME STREET ADDRESS CITY-ST-ZIP	Kallins, Marc S.  ETADDRESS 7252 Manatee Ave. W.  ST-ZIP Bradenton FL. 34209  E				EET ADDRESS -ST-ZIP			☐ Change	Addition .
TITLE NAME STREET ADDRESS CITY-ST-ZIP					E IE EET ADDRESS '~ST~ZIP			☐ Change	Addition
NAME STREET ADDRESS					E IE EET AODRESS '-ST-ZIP			Change	Addition
NAME					E EET ADDRESS -ST-ZIP	د پښونو شو. پونيون ت		⊸ □ Change	Addition.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Delete Martin, George 7252 Manatee Ave. W. Bradenton, FL, 34209							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	:		☐ Delete	1	·			☐ Change	Addition
11. 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 turther 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Dayling Phone #									