2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 27, 2004
Secretary of State

DOCUMENT# L03000025414

Entity Name: PINNACLE SYSTEMS INTEGRATION, LLC

Current Principal Place of Business:

2553 WOODFIELD CIRCLE
WEST MELBOURNE, FL 32904 US

New Principal Place of Business:

Current Mailing Address:

2553 WOODFIELD CIRCLE
WEST MELBOURNE, FL 32904 US

New Mailing Address:

FEI Number: 77-0604934 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KINBERG, EDWARD J
2101 S. WAVERLY PLACE
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: KLEIN, WILLIAM D
Address: 2553 WOODFIELD AVENUE
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: MGRM ( ) Delete
Name: SCHWAB, MICHAEL P
Address: 2553 WOODFIELD AVENUE
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: RONNIE, WITHROW H
Address: 2691 PEPPER AVE.
City-St-Zip: MELBOURNE, FL 32935 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RONNIE H WITHROW MGRM 07/27/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date