## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **DOCUMENT # L05000038464**

1. Entity Name

PINNACLE COMMERCIAL MORTGAGE, LLC



**FILED** Feb 28, 2007 08:00 A Secretary of State

Principal Place of Business

1500 LEE RD. SUITE 200 ORLANDO, FL 32810 US Mailing Address

P.O. BOX 608066

ORLANDO, FL 32860-8066 US



01192007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-2720089	 !	Not Applicable
5. Certificate of Status Desired	\$5.00	Additional acuired

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

F&L CORP ONE INDEPENDENT DRIVE, SUITE 1300

## DO NOT WRITE

JACKSON	VILLE, FL 32202-5017	IN THIS SPACE		
	named entity submits this statement for the purpose of changing its registere ions of registered agent.	d office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE		Agent signature required when reinstating) DATE		
Fi D	iling Fee is \$50.00 ue by May 1, 2007	-		
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LONG, DOUGLAS F 1500 LEE ROAD ORLANDO, FL 32810			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		U00000651315 03/09/07-80003-001,50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		•		
TITLE NAME STREET ADDRESS City-St-Zip	·			

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.

Douglas F. Long

1-30-07

407-578-2000

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #