2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000056517

PINNACLE SOUTH FLORIDA PROPERTIES, LLC



FILED Apr 06, 2007 8:00 am Secretary of State

04-06-2007 90227 017 ****50.00

Principal Place of Business

Mailing Address

1239 NATIONAL AVENUE ROCKFORD, IL 61103

SIGNATURE:

1239 NATIONAL AVENUE ROCKFORD, IL 61103

03302007 No Chg-LLC

CR2E083 (11/05)

Fee Required

4. FEI Number	 Applied For
20-2972439	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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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 revisiting)	DATE	
Filing Fee Is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
NAME STREET ADDRESS CITY-ST-ZIP	MGR BETO, DAVE 1239 NATIONAL AVENUE ROCKFORD, IL 61103			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT V	/RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SI	PACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling 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 feceiver or trustee empowered to exemple this report as required by Chapter 608, Florida Statutes.				