2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000083203

1. Entity Name
PINNACLE IMAGES, LLC

Principal Place of Business	Mailing Address
1219 AIRPORT RD., SUITE 314	1219 AIRPORT RD., SUITE 314
DESTIN, FL 32541	DESTIN, FL 32541

DO NOT WRITE IN THIS SPACE

01252008 No Chg-LLC   CR2E083 (12/07)

DATE

4. FEI Number
20-4352229   CHECK NO.

AMOUNT   Applied For
Not Applicable.

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

LIPPERT, MICHAEL
502 OCESOLA DRIVE
DESTIN, FL 32541

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	LIPPERT, MICHAEL
STREET ADDRESS	981-3 HIGHWAY 98 EAST, PMB 411
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000802374
02/01/08-80056-013 138.75

DO NOT WRITE IN THIS SPACE

DATE   CHECK NO.   AMOUNT

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #