

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056891

FILED  
Apr 27, 2006  
Secretary of State

Entity Name: PINNACLE TOWERS IV INC.

## Current Principal Place of Business:

301 N CATTLEMEN RD.  
SUITE 300  
SARASOTA, FL 34232

## New Principal Place of Business:

## Current Mailing Address:

301 N CATTLEMEN RD.  
SUITE 300  
SARASOTA, FL 34232

## New Mailing Address:

FEI Number: 65-1037169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CFOV ( ) Delete  
Name: FREEMAN, WILLIAM T  
Address: 4914 LYFORD CAY RD  
City-St-Zip: TAMPA, FL 33629

Title: DP ( ) Delete  
Name: GRAIN, DAVID  
Address: 6556 THE MASTERS AVE.  
City-St-Zip: BRADENTON, FL 34202

Title: SV ( ) Delete  
Name: MCMULLEN, GREENSON  
Address: 3721 EAGLE HAMMOCK DR  
City-St-Zip: SARASOTA, FL 34232

Title: CON (X) Delete  
Name: BLOMMER, CAMILLE  
Address: 1833 OAK VIEW DR  
City-St-Zip: SARASOTA, FL 34232

Title: T ( ) Delete  
Name: GUARD, TOM  
Address: 9406 AZALEA RIDGE CIR  
City-St-Zip: TAMPA, FL 33647

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change ( ) Addition  
Name: EDENS, WESLEY  
Address: 301 N CATTLEMEN ROAD, SUITE 300  
City-St-Zip: SARASOTA, FL 34202

Title: D (X) Change ( ) Addition  
Name: BIZICK, RONALD G  
Address: 301 N CATTLEMEN ROAD, SUITE 300  
City-St-Zip: SARASOTA, FL 34232

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM FREEMAN

CFO

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date