## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057119

Entity Name: PINNACLE PIZZA, INC.

**FILED** Mar 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

D/B/A/ DOMINO'S PIZZA D/B/A/ DOMINO'S PIZZA 1269 QUAIL WALK DR 3758 KINSLEY PLACE ALTAMONTE SPRINGS, FL 32714 WINTER PARK, FL 32792

**Current Mailing Address:** New Mailing Address:

D/B/A/ DOMINO'S PIZZA D/B/A/ DOMINO'S PIZZA 3758 KINSLEY PLACE 1269 QUAIL WALK DR ALTAMONTE SPRINGS, FL 32714 WINTER PARK, FL 32792

FEI Number: 20-0024234 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAVENER, JONATHAN A HAVENER, JONATHAN A 1269 QUAIL WALK DRIVE 3758 KINSLEY PLACE ALTAMONTE SPRINGS, FL 32708 WINTER PARK, FL 32792 US US

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: 03/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete HAVENER, JONATHAN A Name: 1269 QUAIL WALK DRIVE Address:

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DV () Delete GRIEG, TOM Name: 19630 LANSHELL DR Address: FT MYERS, FL 33917

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition

Name: HAVENER, JONATHAN A 3758 KINSLEY PLACE Address: City-St-Zip: WINTER PARK, FL 32792

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JONATHAN A HAVENER **DPST** 03/25/2008