

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056426

FILED  
Apr 11, 2011  
Secretary of State

Entity Name: PINNACLE EMPLOYEE LEASING, INC

**Current Principal Place of Business:**

115 W OLYMPIA AVE  
PUNTA GORDA, FL 33950 US

**New Principal Place of Business:**

**Current Mailing Address:**

115 W OLYMPIA AVE  
PUNTA GORDA, FL 33950 US

**New Mailing Address:**

FEI Number: 20-2692166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOMES, ROBERT L  
115 W OLYMPIA AVE  
PUNTA GORDA, FL 33950 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

**OFFICERS AND DIRECTORS:**

Title: P,D  
Name: GOMES, ROBERT L  
Address: 115 W OLYMPIA AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: S,T  
Name: GOMES, ROBERT L  
Address: 115 W OLYMPIA AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VP,D  
Name: GOMES, TAMRA A  
Address: 115 W OLYMPIA AVE  
City-St-Zip: PUNTA GORDA, FL 33950 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT L GOMES

PRES

04/11/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date