## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000031067

Entity Name: THE PINNACLE REAL ESTATE GROUP, INC.

FILED Feb 19, 2007 Secretary of State

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

6400 TIMES SQUARE AVENUE 4327 SOUTH HIGHWAY 27

SUITE B114 **SUITE #416** 

ORLANDO, FL 32835 CLERMONT, FL 34711

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

6400 TIMES SQUARE AVENUE 4742 W. CLARKSTON RD.

SUITE B114 CLARKSTON, MI 48348 US ORLANDO, FL 32835 US

FEI Number: 22-3921950 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:

BORST, RICHARD BORST, RICHARD

4327 SÓUTH HIGHWAY 27 3344 CORONA VILLAGE WAY #308 SUITE #416 ORLANDO, FL 32835 US CLERMONT, FL 34711 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: 02/19/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete Title: (X) Change ( ) Addition GOTT, MICHAEL GOTT, GWENDOLEN Name: Name: P.O. BOX 144 4742 W. CLARKSTON RD. Address: Address: City-St-Zip: LAKE ORION, MI 48361 US City-St-Zip: CLARKSTON, MI 48348 US

Title: Title: DIR () Delete (X) Change ( ) Addition

Name: BORST, RICHARD Name: BORST, RICHARD

3344 CORONA VILLAGE WAY, #308 4327 SOUTH HIGHWAY 27, SUITE #416 Address: Address:

ORLANDO, FL 32835 US CLERMONT, FL 34711 US City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition DIR DIR KESSLER, DEBORAH KESSLER, DEBORAH Name: Name:

P.O. BOX 144 4742 W. CLARKSTON RD. Address: Address: City-St-Zip: LAKE ORION, MI 48361 US City-St-Zip: CLARKSTON, MI 48348 US

Title: DIR (X) Delete Title: () Change () Addition

GOTT, GWENDOLEN Name: Address: P.O. BOX 144 Address: City-St-Zip: LAKE ORION, MI 48361 US 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: GWENDOLEN GOTT **PRES** 02/19/2007