

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000033204

FILED
Mar 09, 2009
Secretary of State

Entity Name: PINNACLE GROUP HOLDINGS, INC.

Current Principal Place of Business:

109 N. BRUSH STREET
SUITE 400
TAMPA, FL 33602

New Principal Place of Business:

1107 W. KIRBY ST.
TAMPA, FL 33604

Current Mailing Address:

109 N. BRUSH STREET
SUITE 400
TAMPA, FL 33602

New Mailing Address:

1107 W. KIRBY ST.
TAMPA, FL 33604

FEI Number: 59-3226954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEBOSE, FRANK
1107 W. KIRBY ST.
TAMPA, FL 33604 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: FRANK DEBOSE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: DEBOSE, FRANK
Address: 1107 W. KIRBY ST.
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: MCNULTY, JAMES A
Address: 4419 W. SEVILLA
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: JONES, ARTHUR T
Address: 6433 RENWICK CIRCLE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: WARREN, STASSA E
Address: 2412 GROVEWAY DR.
City-St-Zip: VALRICO, FL 33596

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: FRANK DEBOSE

CP

03/09/2009

Electronic Signature of Signing Officer or Director

Date