FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address 1605 MAIN ST.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1605 MAIN ST.



appears in Block 12 or Block 13 if changed or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 15 1997 8:00am

Secretary of State

Daytime Phone #

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000048704 (8)

PINNACLE COMMUNICATIONS, INC.

STE 1004 SARASOTA FL 34236 US			STE 1004 SARASOTA FL 34238-5861 US					3. Date Incorporated or Qualified 06/27/1994				3a. Date of Last Report 05/01/1996		
2. Principal F	Place of Business		2a. Mailing	Address	• • • • • • • • • • • • • • • • • • • •	_	·—····		FEI Number				$\dot{-}$	applied For
21		26				- 1	65-0509	709				lot Applicable		
Suite, Apt #, etc			Suile, Apt. #, elc.				5.	Certificate o	of Status De	sired		— — — —	Additional Required	
City & State 23			City & State					6.	6. Election Campaign Financing Trust Fund Contribution				\$5.00 May Be Added to Fees	
Zıp	[C	ountry	Zip		Coun	try		8.	This corpor	ation has lia	oility for	intangible	tax under	s. 199.032,
24	25		29		30				Florida Stat	utes		Yes [] No	
	9. Name and A	Address of Currer	nt Registered A	gent				10.	Name and	Address of	New Re	gistered	Agent	
MAY	ro, todd l				8	31	Name							
1605 MAIN ST.				82 Street A			Street Ad	dress (F	P.O. Box Nun	nber is Not A	Acceptab	ole)		
STE	1004							.000 (
SAR	RASOTA FL 3423	6			6	33								
						14	City						Inc. 7iv	Code
						*	City					FL	85 Zip	Code
11. Pursuant office or agent. I a	to the provisions or registered agent, or am familiar with, and	f Sections 607 050 r both, in the State d accept the oblig	02 and 607,1508 of Florida Suct ations of, Sectio	3, Florida Statu h change was n 607.0505, F	ites, the abo authorized Torida Statu	by les	e-named co the corpor	orporatio ration's l	on submits the board of dire	is statement ctors. I here	for the p by acce	ourpose of pt the app	changing ointment a	its registered s registered
SIGNATURE	Flands	o name of registered age	and and tale I make the		TE: Registered	4	-1 pipest us an		n rainstalia al			DATE		
12.	sideating (Abied or boca		D DIRECTORS	ON) NO	13.	- ger	nt signatura rec		ADDITIONS/	CHANGEST	O OFFIC		DIRECTO	DS IN 12
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STREET ADDRESS							ADDRESS							
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NAME					6.2 NAN									
STREET ADDRESS					63 S1R	EET	ADDRESS							
City of 20	1				0.4.007	. 03	3 7 to							

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the december of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name