

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000078285 (0)

1. Corporation Name
PINNACLE INVESTMENT GROUP, INC.

Principal Place of Business

6706 NORTH 9TH AVENUE
BLDG. D, SUITE 22
PENSACOLA FL 32504

Mailing Address

6706 NORTH 9TH AVENUE
BLDG. D, SUITE 22
PENSACOLA FL 32504-9303

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 25 26 27 28 29 30

3. Name and Address of Current Registered Agent

MOORHEAD, STEPHEN R
4300 BAYOU BOULEVARD
SUITES 12 & 13
PENSACOLA FL 32503

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.14(1) Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 607.05(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Secretary of State)

(Signature of Registered Agent or Secretary of State)

(Signature)

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

2. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

3. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

2. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

3. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(a), 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 secretary or the person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this change or on an attachment with an address.

SIGNATURE: Donna L. Robinson, President

FILED
May 02 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified 10/02/1995
3a. Date of Last Report 10/23/1996
4. FIC Number 59-3360307
5. Certificate of Status Desired [] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [] \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [] Yes [] No
10. Name and Address of New Registered Agent

CR200341096