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

## **PROFIT** CORPORATION **ANNUAL REPORT**

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

## FILED May 18 1998 8:00am Secretary of State

	1998	12/	DIVISION OF C	ORPORA	ATIC	2NC	Į	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	<i>J</i> • • • •	•		
DOCUMENT # P9600004326 (0) 1. Corporation Name PINNACLE REPORTING, INC.								A MAGNAGO UNA MAGNAGO MAGNAGO BAGNAGA A	<b>.</b>	(P) <b>0</b> 14 <b>0</b> (	A Ance Jane	
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Principal Plac	e of Business	Mail	ing Address				{	1841/£31   18 (E1)   81111   83111   88111   84111	[811] 861]] 81888 ]]		I Bill IFFI	
1001 FLAGLER CENTER 1001 FLAGLER CENTER 805 S. FLAGLER DRIVE 505 S. FLAGLER DRIVE												
505 S. FLAGLER DRIVE WEST PALM BEACH FL 33401			WEST PALM BEACH FL 33401					DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualified 01/11/1996				
2. Principal Place of Business 21			2a. Mailing Address 26					4, FEt Number 65-0637268			lied For Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		75 AG	iditional uired	
City & State			City & State				_	6. Election Campaign Financing	\$5.	۸ 00.	/lay Be	
23		28			- 64			Trust Fund Contribution		ded to		
Zip 24	Country 25	29	(ip	30 Cou	ntry		1	<ol> <li>This corporation owes or has paid to Personal Property Tax due June 30</li> </ol>			ngible No	
24	9. Name and Address of Curren		red Agent	30]				10. Name and Address of New Regis		<u> </u>		
SC	HNEIDER, JOHN C				81	Name						
1001 FLAGLER CENTER				}	B2 Street Add			s (P.O. Box Number is Not Acceptable)	<del></del>		<del></del>	
505 S. FLAGLER DRIVE					_							
WEST PALM BEACH FL 33401					83		_					
<b>N</b>					84	City				Zip Čo	ì	
11. Pursuant office or rangent. La	to the provisions of Sections 607.050, egistered agent, or both, in the State or familiar with, and account he obliga	2 and 607 of Florida ations of 3	1508, Florida Statute Such change was a Section 607 0505, Flo	es, the at authorized orida Stati	oove d by	named co the corpo	orpor oration	ation submits this statement for the purp n's board of directors. I hereby accept the	ose of changi he appointmen	ng its it as re	registered egistered	
SIGNATURE							_					
	Signature typed or printed name of regulated age OFFICERS AND			Registered	Ager	nt signature rec	quired	when reinstating)  ADDITIONS/CHANGES TO OFFICER	DATE DIDEC	TORC	IN 10	
12.	P OFFICENS AND	JUILLO	DELETE	11 10	LE			ADDITIONS/CHANGES TO OFFICER	Cha		Addition	
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STREET ADDRESS	777 S. FLAGLER DRIVE 8TH		LOOR 1.3 ST			ADDRESS					l	
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NAME CORRECT ADDRESS					-	ADDRESS					ļ	
STREET ADDRESS CITY-ST-ZIP				6.4 CIT								
	positive that the information gunnled w	itle than film	a door not qualify to				la Ca	ection 110 07/3Vi) Florida Statutes I fur	that agetify the	ن مطع	tormotion	

I nereby certity 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CALATURE.