

P97000062712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

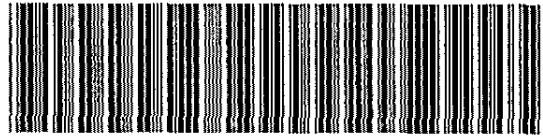
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TALLAHASSEE, FLORIDA

12/30  
[Handwritten initials]

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Pinnacle Rental Homes, Inc.

(Name of corporation)

**DOCUMENT NUMBER:** P97000062712

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Harris

(Name of contact person)

Pinnacle Rental Homes, Inc.

(Firm/Company)

405 Camus Street

(Address)

Celebration, FL 34747

(City/state and zip code)

For further information concerning this matter, please call:

John Harris

(Name of contact person)

at (407) 460 6111

(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Pinnacle Rental Homes, Inc.
2. The principal office address: 5503 West Irlo Bronson Highway HIGHWAY  
Kissimmee, FL 34746
3. The mailing address (if different): 5503 West Irlo Bronson Highway HIGHWAY  
Kissimmee, FL 34746
4. Date of incorporation/qualification: 07/21/1997 Document number: P97000062712
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

John W Lance

5505 W Irlo Bronson Hwy

Kissimmee FL 34746

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Byrd & Gantt CPAs, P.A.

3359 W Vine St # 104

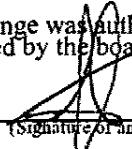
(P.O. Box NOT acceptable)

Kissimmee FL 34741

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

John Harris

(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

12/16/2004

(Date)

If signing on behalf of an entity:

Byrd & Gantt CPAs PA

(Typed or Printed Name)

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314