


FILED
Apr 12, 1999 8:00 am
Secretary of State

04-12-1999 90009 019 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000083300

1. Corporation Name

PINNACLE WOODS APARTMENTS, INC.

Principal Place of Business 7331 PINNACLE PINES FORT MYERS FL 33907	Mailing Address 7331 PINNACLE PINES FORT MYERS FL 33907
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/25/1998		4. FEI Number 65-0868312		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		58.75 Additional Fee Required		
6. Election Campaign Financing <input type="checkbox"/>		5.00 May Be Added to Fees		
7. Trust Fund Contribution <input type="checkbox"/>		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 17590 Boat Club Dr.		2a. Mailing Address 16520 S. Tamiami TR.		3. Date Incorporated or Qualified 09/25/1998	
21. Suite, Apt. #, etc. Ft. Myers FL		26. Suite, Apt. #, etc. #18-252		4. FEI Number 65-0868312	
22. City & State 33908		27. City & State Fort Myers FL		5. Certificate of Status Desired <input type="checkbox"/>	
23. Zip 33908		28. Zip 33908		58.75 Additional Fee Required	
24. Country USA		29. Country USA		6. Election Campaign Financing <input type="checkbox"/>	
30. Name and Address of Current Registered Agent BARKER, R. SCOTT 12699 NEW BRITANNY BLVD. FORT MYERS FL 33907		31. Name Frank J. Eicher		32. Street Address (P.O. Box Number is Not Acceptable) 17590 Boat Club Drive	
		33. City Fort Myers FL		34. Zip Code 33908	
		35. City FL		36. Zip Code 33908	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Frank J. Eicher, Pres. *Frank J. Eicher* **4/22/99**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D EICHER, FRANK J 17590 BOAT CLUB DR. FORT MYERS FL 33908	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition President & Secretary
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Vice President & Treasurer Maxine Lester 17590 Boat Club Drive Fort Myers FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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 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, with all other like empowered.

SIGNATURE: Frank J. Eicher *Frank J. Eicher* **April 5, 1999 941-275-6849**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)