

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 23, 2003 8:00 am
Secretary of State

06-23-2003 90053 019 ***558.75

0011431 AT

DOCUMENT # P99000003635

1. Entity Name

PINNACLE BUILDING CORP.



Principal Place of Business

1460 S. MCCALL ROAD
SUITE 3-D
ENGLEWOOD FL 34223

Mailing Address

1460 S. MCCALL ROAD
SUITE 3-D
ENGLEWOOD FL 34223

2. Principal Place of Business

1460 S. McCall Rd

3. Mailing Address

same as #2

Suite, Apt. #, etc.

3 H

Suite, Apt. #, etc.

3 H

City & State

Englewood, FL

City & State

Englewood, FL

Zip

34223

Country

USA

Zip

34223

Country

USA

4. FEI Number

65-0898750

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

MULLIS, MICHAEL C
9046 HILOLO LANE
VENICE FL 34293

7. Name and Address of New Registered Agent

Name

Russell Pressly

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

1071 Kant Street

City

Englewood

FL

Zip Code

34224

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

R.
SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6-13-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **MULLIS, MICHAEL C**
STREET ADDRESS **9046 HILOLO LANE**
CITY-ST-ZIP **VENICE FL 34293**

TITLE **VMD** ☐ Delete
NAME **PRESSLY, RUSSELL L**
STREET ADDRESS **1071 KANT STREET**
CITY-ST-ZIP **ENGLEWOOD FL 34224**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☐ Change ☒ Addition
NAME **Cheryl L. Conner**
STREET ADDRESS **1071 Kant Street**
CITY-ST-ZIP **Englewood, FL 34224**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-13-03

941-270-1800

Date

Daytime Phone #

CR2E034 (10/02)