## 2008 FOR PROFIT CORPORATION

## Secretary of State ANNUAL REPORT ~ **DOCUMENT # P99000070213** 02-22-2008 90017 019 \*\*\*150.00 1. Entity Name PINNACLE POOL CONSTRUCTION, INC. 40030208 Principal Place of Business Mailing Address 6323 JANES LANE 6323 JANES LN NAPLES, FL 34109 NAPLES, FL 34109 CR2E034 (11/05) No Chg-P 01142008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3594523 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE MCAVOY, BRIAN V 5551 RIDGEWOOD DRIVE **STE 405** IN THIS SPACE NAPLES, FL 34108 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ח TITLE SU. CHEN TUNG 2200 SNOOK DRIVE 3250 60TH ST SW NAME STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34102 Ď TITLE SU, CHEN K NAME 1150 OAKS BLVD STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34119 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 eath; that I am an officer or director of the corporation or the receiver or the segmentary of the exercise in the receiver or the segmentary of the exercise in the segmentary of the exercise in the exercise in the segmentary of the exercise in the exercise in

**SIGNATURE** 

TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-2008

239-596-1600

Daytime Phone #

FILED Feb 22, 2008 8:00 am