

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V08292 (7)**
1. Corporation Name
PINNACLE CONSTRUCTION & MANAGEMENT COMPANY



Principal Place of Business Mailing Address
500 N ORLANDO AVE 1196 WINTER PARK FL 32789 US

3. Date Incorporated or Qualified **01/22/1992** 3a. Date of Last Report **04/25/1995**
4. FEI Number **59-3103689** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **1155 S. Semoran Blvd.** 26 **1155 S. Semoran Blvd.**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **Suite 1118** 27 **Suite 1118**
City & State City & State
23 **Winter Park, FL** 28 **Winter Park, FL**
Zip Country Zip Country
24 **32792** 25 **USA** 29 **32792** 30 **USA**

9. Name and Address of Current Registered Agent
TEPLITSKY IGOR
500 N ORLANDO AVE
1196
WINTER PARK FL 32789

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
1155 S. Semoran Blvd,
83 **Suite 1118**
84 City **Winter Park** FL 85 Zip Code **32792**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 *[Signature]* **Igor Teplitsky** DATE **4/29/96**
Signature, typed or printed name of registered agent, and date of appointment. (NOTE: Registered Agent signature required when first filing.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TEPLITSKY, IGOR	1.2 NAME	
STREET ADDRESS	500 N. ORANGE AVE. #1196	1.3 STREET ADDRESS	1155 S. Semoran Blvd. #1118
CITY-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP	Winter Park, FL 32792
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAUCHAT, WILLIAM H, JR.	2.2 NAME	
STREET ADDRESS	500 N. ORLANDO AVE. #1196	2.3 STREET ADDRESS	1155 S. Semoran Blvd. #1118
CITY-ST-ZIP	WINTER PARK FL	2.4 CITY-ST-ZIP	Winter Park, FL 32792
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TEPLITSKY, LILIAN	3.2 NAME	
STREET ADDRESS	500 N. ORLANDO AVE. #1196	3.3 STREET ADDRESS	1155 S. Semoran Blvd. #1118
CITY-ST-ZIP	WINTER PARK FL	3.4 CITY-ST-ZIP	Winter Park, FL 32792
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TEPLITSKY, MARINA	4.2 NAME	
STREET ADDRESS	500 N. ORLANDO AVE. #1196	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Director
STREET ADDRESS		5.3 STREET ADDRESS	Davis, Lyal A.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	1155 S. Semoran Blvd. #1118
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *[Signature]* **Lilian Teplitsky, Secy/Treas** DATE **4/29/96** **407 678-3939**
Signature and typed or printed name of signing officer or director. Date. District Phone #.

CR2E034 (12/95)