2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2022
Secretary of State
1349879096CC

DOCUMENT# G46735

Entity Name: PINNACLE PORT REALTY CORPORATION

Current Principal Place of Business:

23223 FRONT BEACH RD.
PANAMA CITY BEACH, FL 32413-1008

Current Mailing Address:

23223 FRONT BEACH RD.
PANAMA CITY BEACH, FL 32413-1008

FEI Number: 59-2307975

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY ATTY
427 MCKENZIE AVE
PANAMA CITY, FL 32401 US

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.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SEC
Name	JAY, JOYCE
Address	9123 THORNTON BLVD
City-State-Zip:	JONESBORO GA 30236

Title	DIRECTOR
Name	COTTEN, BRENT
Address	68 VALLEYBROOK DRIVE
City-State-Zip:	HENDERSONVILLE TN 37075

Title	DIRECTOR
Name	WOJCIK, DAN
Address	3208 REDSTONE DRIVE
City-State-Zip:	ARLINGTON TX 76001

Title	DIRECTOR
Name	BAUER, ANN
Address	2539 SENECA DRIVE
City-State-Zip:	LOUISVILLE KY 40205

Title	TREASURER
Name	STOKE , SHEILA
Address	7906 WESTOVER DRIVE
City-State-Zip:	PROSPECT KY 40059

Title	PRESIDENT
Name	WILLIS, JACK
Address	23223 FRONT BEACH ROAD A-722
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	VP
Name	ELDER, JIMMY W
Address	1540 LAKE KOINONIA DRIVE
City-State-Zip:	WOODSTOCK GA 30189

Title	GENERAL MANAGER
Name	FLICK, JAMES
Address	23223 FRONT BEACH RD.
City-State-Zip:	PANAMA CITY BEACH FL 32413-1008

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JAMES FLICK GENERAL MANAGER 01/25/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	TOMPKINS II, CHARLES
Address	8447 MAYNARDVILLE PIKE
City-State-Zip:	KNOXVILLE TN 37938