2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001217

Entity Name: PROGRAM PLANNING PROFESSIONALS, INC.

FILED Jul 14, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Finicipal Flace of Business.	New Fillicipal Flace Of Busiliess

% KEVIN PETERSON 1340 EISENHOWER PLACE ANN ARBOR, MI 48108

Current Mailing Address: New Mailing Address:

% KEVIN PETERSON 1340 EISENHOWER PLACE ANN ARBOR, MI 48108

FEI Number: 38-3166928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: CHRM

Name: BALFOUR, ADRIAN
Address: 1340 EISENHOWER PLACE
City-St-Zip: ANN ARBOR, MI 48108

Title: CEO

Name: HODGSON, MARTIN
Address: 1340 EISENHOWER PLACE
City-St-Zip: ANN ARBOR, MI 48108

Title: D

Name: SAUSVILLE, PAUL
Address: 1340 EISENHOWER PLACE
City-St-Zip: ANN ARBOR, MI 48108

Title: GM

Name: BRANNOCK, DERMOT Address: 538 N. DIVISION City-St-Zip: ANN ARBOR, MI 48104

Title: [

Name: WARREN, TODD

Address: 1340 EISENHOWER PLACE City-St-Zip: ANN ARBOR, MI 48108

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: ADRIAN BALFOUR CHRM 07/14/2010