## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000001522

Entity Name: PPMC, INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
ONE HEAL	THSOUTH PAF AM, AL 35243					
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 38 BIRMINGHA	0546 AM, AL 35238	US				
FEI Number:	63-1071721	FEI Number Applied For ( ) FEI	Number Not Appl	licable ( ) 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		
Election Cam	paign Financing 1	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CPD () D GRINNEY, JAY ONE HEALTHSOU BIRMINGHAM, AL		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VTD ( ) D SNOW, MICHAEL ONE HEALTHSOL BIRMINGHAM, AL	JTH PARKWAY	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition SNOW, MICHAEL D ONE HEALTHSOUTH PARKWAY BIRMINGHAM, AL 35243		
Title: Name: Address: City-St-Zip:	VAS () D DEMARAY, C. DR ONE HEALTHSOU BIRMINGHAM, AL	JTH PARKWAY	Title: Name: Address: City-St-Zip:	VT (X) Change ( ) Addition WORKMAN, JOHN ONE HEALTHSOUTH PARKWAY BIRMINGHAM, AL		
Title: Name: Address: City-St-Zip:	VSD () D DOODY, GREGO ONE HEALTHSOU BIRMINGHAM, AL	JTH PARKWAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V () D MENKE, BRIAN M ONE HEALTHSOU BIRMINGHAM, AL	JTH PARKWAY	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VAS () D HORTON, WILLIA ONE HEALTSOUT BIRMINGHAM, AL	TH PKWY	Title: Name: Address: City-St-Zip:	VAS (X) Change ( ) Addition MARTIN, JODY ONE HEALTSOUTH PKWY BIRMINGHAM, AL 35243		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JODY MARTIN VAS 04/27/2006