

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000012203

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: PPNOM INC

**Current Principal Place of Business:**

362 PINEHURST CIRCLE  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

4915 RATTLESNAKE HAMMOCK RD  
#139  
NAPLES, FL 34113

**New Mailing Address:**

FEI Number: 27-1539469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRINKMAN, BOB  
362 PINEHURST CIRCLE  
NAPLES, FL 34113 US

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

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: MD  
Name: BRINKMAN, BOB  
Address: 362 PINEHURST CIRCLE  
City-St-Zip: NAPLES, FL 34113 US

Title: AD  
Name: BRINKMAN, JEN  
Address: 362 PINEHURST CIRCLE  
City-St-Zip: NAPLES, FL 34113 US

Title: AD  
Name: NITCH, PHILLIP  
Address: 739 WEST WILLIAM CANNON APT 2035  
City-St-Zip: AUSTIN, TX 78745 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEN BRINKMAN

AD

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date