

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142346

FILED  
Feb 06, 2009  
Secretary of State

Entity Name: PTN, INC

**Current Principal Place of Business:**

3240 N.JOHN YOUNG PKWY  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

3240 N.JOHN YOUNG PKWY  
KISSIMMEE, FL 34741

**New Mailing Address:**

FEI Number: 38-3727922      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEE NAILS  
3240 N.JOHN YOUNG PKWY  
KISSIMMEE, FL 34741    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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P            ( ) Delete  
Name: NGUYEN, PHONG T  
Address: 3240 N.JOHN YOUNG PKWY  
City-St-Zip: KISSIMMEE, FL 34741

Title: VP            ( ) Delete  
Name: HO, ANNIE M  
Address: 11790 WOODSHIRE CIRCLE  
City-St-Zip: FORT MYERS, FL 33913

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P            (X) Change ( ) Addition  
Name: HO, ANNIE M P  
Address: 11790 WOODSHIRE CIR  
City-St-Zip: FORT MYERS, FL 33913

Title: M            (X) Change ( ) Addition  
Name: NGUYEN, PHONG T MANAGER  
Address: 2510 SWOOP CIR  
City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information supplied with this filing does not qualify 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: ANNIE MY CHAU HO

P

02/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date