

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P05402**

1. Entity Name  
PPA INVESTMENTS, INC.



Principal Place of Business  
500 COLONIAL CENTER PARKWAY  
STE 600  
ROSWELL, GA 30076 US

Mailing Address  
500 COLONIAL CENTER PARKWAY  
SUITE 600  
ROSWELL, GA 30076 US



02112008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**58-1604674**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PT  
MORRIS, GEORGE W  
13675 FREEMANVILLE RD.  
ALPHARETTA, GA

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
DUBAY, DANIEL M  
5693 CREEKSIDE DR  
NORCROSS, GA 30092

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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TITLE  
NAME  
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CITY-ST-ZIP

000000830198  
02/26/08-80073-024 61.25

**DO NOT WRITE  
IN THIS SPACE**

000000830198  
02/26/08-80073-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Michelle F. Casler* **Michelle F. Casler Principal**

*2/11/2008*  
Date

*770 998 8721*  
Daytime Phone #