

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003924

FILED
Mar 05, 2008
Secretary of State

Entity Name: TRIAD INSURANCE MANAGEMENT & SERVICES AGENCY, INC.

Current Principal Place of Business:

116 JOHN ROBERT THOMAS DR., SUITE A
EXTON, PA 19341

New Principal Place of Business:

Current Mailing Address:

116 JOHN ROBERT THOMAS DR., SUITE A
EXTON, PA 19341

New Mailing Address:

FEI Number: 23-3060386 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ.
1267 BERKSHIRE LANE, SUITE 200
TARPON SPRINGS, FL 34688 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: PD () Delete
Name: STAZZONE, JOSEPH
Address: 244 LATERNBACK ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: STD () Delete
Name: WILLIAMS, ROBERT W
Address: 66 N. ATLANTIC AVE. #106
City-St-Zip: COCOA BEACH, FL 32931

Title: V () Delete
Name: STUBBENDIECK, BRADLEY A
Address: 614 BEAUMONT CIRCLE
City-St-Zip: WEST CHESTER, PA 19380

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: STUBBENDIECK, BRADLEY A
Address: 13808 FAIRWAY STREET
City-St-Zip: LEAWOOD, KS 66224

Title: V () Change (X) Addition
Name: DASCALOFF, LISA A
Address: 640 LANCASTER COURT
City-St-Zip: DOWNINGTOWN, PA 19335

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: LISA A. DASCALOFF

V

03/05/2008

Electronic Signature of Signing Officer or Director

_____ Date