

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 582414

FILED  
Mar 04, 2005  
Secretary of State

Entity Name: TRIAD COMMUNICATIONS, INC.

## Current Principal Place of Business:

1122 NW 20TH DRIVE  
GAINESVILLE, FL 32605 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 13355  
GAINESVILLE, FL 32604 US

## New Mailing Address:

FEI Number: 59-1854642      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUBIN, LORNA I.  
1122 N.W. 20TH DRIVE  
GAINESVILLE, FL 32605 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: RUBIN, LORNA I.,  
Address: 1122 N.W. 20TH DRIVE  
City-St-Zip: GAINESVILLE, FL

Title: ST ( ) Delete  
Name: RUBIN, MELVIN,  
Address: 1122 N.W. 20TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: V ( ) Delete  
Name: RUBIN, DANIEL J.,  
Address: 350 GARCIA ST  
City-St-Zip: SANTA FE, NM 87501 US

Title: V ( ) Delete  
Name: ISRAELIEVITCH, JAN G,  
Address: 75 HILTON AVE  
City-St-Zip: TORONTO, ON M5R 3E8 CA

Title: D ( ) Delete  
Name: RUBIN, MICHAEL H.,  
Address: 136 SANTA CRUZ ST  
City-St-Zip: SANTA CRUZ, CA 87501 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RUBIN, LORNA I.,  
Address: 1122 N.W. 20TH DRIVE  
City-St-Zip: GAINESVILLE, FL 32605 US

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LORNA RUBIN

PRES

03/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date