

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 08:00 AM
Secretary of State

DOCUMENT # F96000005129	
1. Entity Name TRIAD DESIGN GROUP, P.C.	

Principal Place of Business 4807 KOGER BLVD STE C GREENSBORO, NC 27407	Mailing Address 4807 KOGER BLVD STE C GREENSBORO, NC 27407
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DO NOT WRITE IN THIS SPACE



03012008 No Chg-P CR2E034 (11/05)

4. FEI Number 56-1892684	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

JACOBSON, NORMAN E
2033 MAIN ST #504
SARASOTA, FL 34237

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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: _____ (NOTE: Registered Agent signature required when reinstating)

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

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
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10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	STONE, THOMAS J
STREET ADDRESS	4807-C KOGER BLVD
CITY-ST-ZIP	GREENSBORO, NC 27407
TITLE	DS
NAME	DAVIS, MARK J PE
STREET ADDRESS	4807-C KOGER BLVD
CITY-ST-ZIP	GREENSBORO, NC 27407
TITLE	DT
NAME	LINDSEY, RODNEY M AIA
STREET ADDRESS	4807 - C KOGER BLVD
CITY-ST-ZIP	GREENSBORO, NC 27407
TITLE	DV
NAME	HILL, L. ALLAN PE
STREET ADDRESS	4807 - C KOGER BLVD
CITY-ST-ZIP	GREENSBORO, NC 27407
TITLE	DV
NAME	WHITE, JIMMY O
STREET ADDRESS	4807-C KOGER BLVD
CITY-ST-ZIP	GREENSBORO, NC 27407
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Thomas J. Stone Thomas J. Stone 3/12/08 (336) 218-8282

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #