

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015793

Entity Name: TRIAD LLC

FILED  
Jan 07, 2005  
Secretary of State

**Current Principal Place of Business:**

THE MANAGER, TRIAD LLC  
1234 NE 5TH TERR,  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

1649 SW 28TH AVENUE  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

11553 N ORIOLE LANE  
MEQUON, WI 53092

FEI Number: 58-2668283

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EVANS, GILLIAN C  
1649 SW 28TH AVENUE  
FORT LAUDERDALE, FL 33312 US

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

EVANS, GILLIAN C  
1326 AVOCADO ISLE  
FORT LAUDERDALE, FL 33315 US

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: GCEVANS

01/07/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: EVANS, GILLIAN C  
Address: 1649 SW 28TH AVE  
City-St-Zip: FORT LAUDERDALE, FL 33312

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: EVANS, GILLIAN C  
Address: 1326 AVOCADO ISLE  
City-St-Zip: FORT LAUDERDALE, FL 33315

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GCEVANS

MM

01/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date