

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L34626

FILED
Mar 28, 2007
Secretary of State

Entity Name: TRIAD ADVISORS, INC.

Current Principal Place of Business:

5905 SOUTH CONGRESS AVE.
ATLANTIS, FL 33462 US

New Principal Place of Business:

465 N. COUNTRY CLUB DRIVE
ATLANTIS, FL 33462 US

Current Mailing Address:

5185 PEACHTREE PARKWAY
STE #280
NORCROSS, GA 30092

New Mailing Address:

FEI Number: 65-0173164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WENTLEY, DAVID
465 N COUNTRY CLUB DR
ATLANTIS, FL 33462 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: V () Delete
Name: HIXON, BARRY C.
Address: 789 S. FEDERAL HWY
City-St-Zip: STUART, FL

Title: P () Delete
Name: METTELMAN, MARK
Address: 3500 PARKWAY LANE STE 320
City-St-Zip: NORCROSS, GA 30092

Title: ST () Delete
Name: BRUDERMAN, ROBERT
Address: 5905 S. CONGRESS AVE.
City-St-Zip: ATLANTIS, FL 33462

Title: D () Delete
Name: SMITH, CRAIG
Address: 4344 CHEROKEE TRAIL
City-St-Zip: GAINESVILLE, GA 30504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: METTELMAN, MARK
Address: 5185 PEACHTREE PARKWAY, SUITE 280
City-St-Zip: NORCROSS, GA 30092

Title: ST (X) Change () Addition
Name: BRUDERMAN, ROBERT
Address: 7465 W. LAKE MEAD BLVD., SUITE #100
City-St-Zip: ATLANTIS, FL 33462

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 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: MARK C. METTELMAN

P

03/28/2007

Electronic Signature of Signing Officer or Director

_____ Date