2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# L34626

Entity Name: TRIAD ADVISORS, INC.

FILED Aug 13, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 465 N. COUNTRY CLUB DRIVE ATLANTIS, FL 33462 **Current Mailing Address: New Mailing Address:** 5185 PEACHTREE PARKWAY STE #280 NORCROSS, GA 30092 FEI Number: 65-0173164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WENTLEY, DAVID 465 N COÚNTRY CLUB DR ATLANTIS, FL 33462 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.

OFFICERS AND DIRECTORS:

SIGNATURE:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: () Delete Title: (X) Change () Addition MATHIS, KEITH HIXON, BARRY C. Name: Name: 789 S. FEDERAL HWY 5185 PEACHTREE PARKWAY, SUITE 280 Address: Address: City-St-Zip: STUART, FL City-St-Zip: NORCROSS, GA 30092 US Title: Title: () Change () Addition () Delete Name: METTELMAN, MARK Name: 5185 PEACHTREE PARKWAY, SUITE 280 Address: Address: NORCROSS, GA 30092 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BRUDERMAN, ROBERT Name: Name: 7440 WEST SAHARA AVENUE Address: Address: City-St-Zip: LAS VEGAS, NV 89117 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: Name:

Name: SMITH, CRAIG
Address: 4344 CHEROKEE TRAIL
City-St-Zip: GAINESVILLE, GA 30504

(A) Change (1) Addition
Name: SMITH, CRAIG
Address: 5185 PEACHTREE PARKWAY, SUITE 280
City-St-Zip: NORCROSS, GA 30092

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: KEITH MATHIS EVP 08/13/2008