

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000035085

Entity Name: TRIAD INVESTORS, INC.

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

6355 METROWEST BLVD, STE 330  
ORLANDO, FL 32835

## New Principal Place of Business:

## Current Mailing Address:

6355 METROWEST BLVD, STE 330  
ORLANDO, FL 32835

## New Mailing Address:

FEI Number: 59-3638585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLARD, JAMES G ESQ  
300 SOUTH ORANGE AVE  
STE 1000  
ORLANDO, FL 328013373 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: DPST ( ) Delete  
Name: BRYAN, PAUL F  
Address: 300 SOUTH ORANGE AVE SUITE 1000  
City-St-Zip: ORLANDO, FL 328013373

Title: DVS ( ) Delete  
Name: WILLARD, JAMES G  
Address: 300 SOUTH ORANGE AVE SUITE 1000  
City-St-Zip: ORLANDO, FL 328013373

Title: DVS ( ) Delete  
Name: ROSSMAN, NANCY A  
Address: 6355 METRO WEST BLVD SUITE 330  
City-St-Zip: ORLANDO, FL 32825

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: BRYAN, PAUL F  
Address: 230 SOUTH NEW YORK AVE., SUITE 100  
City-St-Zip: WINTER PARK, FL 32789

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 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: NANCY A ROSSMAN

MS

04/17/2009

Electronic Signature of Signing Officer or Director

Date