2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 13, 2008
Secretary of State

DOCUMENT# P04000028347

Entity Name: TRIAD LOGISTICS SERVICES CORPORATION

Current Principal Place of Business:

150 UTOPIA CIR
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

150 UTOPIA CIR
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 81-0644368 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUGGLE, TIMOTHY R
150 UTOPIA CIR
MERRITT ISLAND, FL 32952 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: TUGGLE, TIMOTHY R
Address: 150 UTOPIA CIR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Delete
Name: TAYLOR, LOUIS E
Address: 135 STURBRIDGE PLACE
City-St-Zip: TYRONE, GA 30290

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition
Name: TUGGLE, TIMOTHY R
Address: 150 UTOPIA CIR
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MR. (X) Change ( ) Addition
Name: BOGALIS, GLENN A
Address: 13449 BEECHBERRY DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: MRS. ( ) Change (X) Addition
Name: TUGGLE, DOROTHY B
Address: 150 UTOPIA CIRCLE
City-St-Zip: MERRITT ISLAND, FL 32952

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: TIMOTHY R. TUGGLE MR. 04/13/2008

Electronic Signature of Signing Officer or Director — Date