

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L34626

FILED
Jan 18, 2012
Secretary of State

Entity Name: TRIAD ADVISORS, INC.

Current Principal Place of Business:

5185 PEACHTREE PARKWAY, SUITE 280
NORCROSS, GA 30092 US

New Principal Place of Business:

Current Mailing Address:

5185 PEACHTREE PARKWAY, SUITE 280
NORCROSS, GA 30092 US

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:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: PD
Name: METTELMAN, MARK C
Address: 5185 PEACHTREE PARKWAY, SUITE 280
City-St-Zip: NORCROSS, GA 30092 US

Title: VPD
Name: PAYNE, CHESTER
Address: 5185 PEACHTREE PARKWAY, SUITE 280
City-St-Zip: NORCROSS, GA 30092

Title: D
Name: BRUDERMAN, ROBERT
Address: 7440 WEST SAHARA AVENUE
City-St-Zip: LAS VEGAS, NV 89117

Title: D
Name: BLANCATO, PHILIP S
Address: 520 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

I hereby 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 all other like empowered.

SIGNATURE: MARK METTELMAN

P

01/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date