

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000050122

Entity Name: TRIAD MEDIA, INC.

FILED
Jan 05, 2008
Secretary of State

Current Principal Place of Business:

171 ENGLISH DRIVE
215
PARKVILLE, MO 64152

New Principal Place of Business:

Current Mailing Address:

171 ENGLISH DRIVE
215
PARKVILLE, MO 64152

New Mailing Address:

FEI Number: 59-3197422 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOENE, JOHN S
100 E SYBELIA AVENUE #205
MAITLAND, FL 32751 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: D () Delete
Name: HACKETT, DOUGLAS S
Address: 171 ENGLISH LANDING DRIVE
City-St-Zip: PARKVILLE, MO 64152

Title: D, S () Delete
Name: HACKETT, MARGIE
Address: 171 ENGLISH LANDING DRIVE
City-St-Zip: PARKVILLE, MO 64152

Title: P () Delete
Name: OLD, RICHARD
Address: 171 ENGLISH LANDING DRIVE
City-St-Zip: PARKVILLE, MO 64152

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: HACKETT, DOUGLAS S
Address: 171 ENGLISH LANDING DRIVE
City-St-Zip: PARKVILLE, MO 64152

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

Title: D (X) Change () Addition
Name: OLD, RICHARD
Address: 171 ENGLISH LANDING DRIVE
City-St-Zip: PARKVILLE, MO 64152

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: DOUGLAS HACKETT

D

01/05/2008

Electronic Signature of Signing Officer or Director

_____ Date