

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701745

FILED
May 01, 2012
Secretary of State

Entity Name: QUANTUM FOUNDATION, INC.

Current Principal Place of Business:

2701 NORTH AUSTRALIAN AVE
#200
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

Current Mailing Address:

2701 NORTH AUSTRALIAN AVE
#200
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 59-0812783 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORBETT, JEANNETTE M
QUANTUM FOUNDATION, INC.
2701 NORTH AUSTRALIAN AVE #200
W. PALM BEACH, FL 33407 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: P
Name: DIAZ, KERRY
Address: 2701 NORTH AUSTRALIAN AVE #200
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: TR
Name: JAMES, KEITH
Address: 4510 PORTOFINO WAY #209
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: VC
Name: MEYER, WILLIAM A
Address: 1601 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: C
Name: MOORE, STEPHEN
Address: 102 GLENBROOK CT
City-St-Zip: ATLANTIS, FL 33462 US

Title: PE
Name: CORBETT, JEANNETTE
Address: 2701 NORTH AUSTRALIAN AVE #200
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TR
Name: LEVIN, STEPHEN
Address: 44 COCOANUT ROW T8
City-St-Zip: PALM BEACH, FL 33480

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOE PASKOSKI

CFO

05/01/2012

Electronic Signature of Signing Officer or Director

_____ Date