2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

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## SECRETARY OF STATE CORPORATIONS DOCUMENT #-A04000001208 1. Entity Name QUANTECH, LTD. 04 APR 19 PM 2: 14 Principal Place of Business Mailing Address 1520 SPIDER LILLY LANE 1520 SPIDER LILLY LANE DELAND, FL 32720 DELAND, FL 32720 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04162004 Chg-LP CR2E003 (10/03) 4. FFI Number Applied For City & State City & State 59-3746190 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent POSSON, RICHARD F Street Address (P.O. Box Number is Not Acceptable) 1520 SPIDER LILLY LANE DELAND, FL 32720 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable DATE 10. Amount of Capital Contributions 2/2, 100 9. Capital Contributions \$7,000.00 as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY L01000014595 DOCUMENT # STREET ADORESS RFPCO GROUP, LLC NAME STREET ADDRESS 1520 SPIDER LILLY LANE CITY-ST-ZIP CITY-ST-ZIP DELAND, FL 32720 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **300035829363** 05/10/04--01096--023 \*\*17 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADORESS STREET ADORESS CITY-ST-ZIP CATY-ST-10P 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes (FPC) Good 1/c 4-16-04 SIGNATURE: