2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# L02000012966

Entity Name: QDI PARTNERS, LLC

Current Principal Place of Business:

C/O JAMES W. GOODWIN
400 N. TAMPA ST., STE. 2300
TAMPA, FL 33602

New Principal Place of Business:

414 ROBERTSON STREET
BRANDON, FL 33511

Current Mailing Address:

C/O JAMES W. GOODWIN
400 N. TAMPA ST., STE. 2300
TAMPA, FL 33602

New Mailing Address:

414 ROBERTSON STREET
BRANDON, FL 33511

FEI Number: 74-3045688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODWIN, JAMES W
400 N. TAMPA ST., STE. 2300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

TIPNES, VICK
414 ROBERTSON STREET
BRANDON, FL 33511 US

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: VICK TIPNES 04/28/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: TIENES, VICKI C
Address: 400 N. TAMPA ST., STE. 2300
City-St-Zip: TAMPA, FL 33602

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: TIPNES, VICK
Address: 414 ROBERTSON STREET
City-St-Zip: BRANDON, FL 33511

Title: MGR ( ) Change (X) Addition
Name: ANGIER, SARAH B
Address: 414 ROBERTSON STREET
City-St-Zip: BRANDON, FL 33511

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SARAH ANGIER MGR 04/28/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date