

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044235

FILED
May 17, 2007
Secretary of State

Entity Name: QUANTUM INVESTMENTS,LLC

Current Principal Place of Business:

4620 SUNBEAM STATION COURT
JACKSONVILLE, FL 32257

New Principal Place of Business:

2729 EGRET WALK TERRACE N.
JACKSONVILLE, FL 32226

Current Mailing Address:

P.O. BOX 351465
JACKSONVILLE, FL 32235 14

New Mailing Address:

FEI Number: 35-2215895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GRANT, KEVIN B
12303 BOSTON HARBOR DRIVE
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

GRANT, KEVIN B
2729 EGRET WALK TERRACE N.
JACKSONVILLE, FL 32226 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: KEVIN B GRANT

05/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLBERT, DAPHNE
Address: 8187 TRAFALGAR SQ.
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM () Delete
Name: GRANT, KEVIN
Address: 12303 BOSTON HARBOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM () Delete
Name: STEVENSON, KENNEY
Address: 2815 ARMSDALE ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: MGRM () Delete
Name: JOHNSON, ANTHONY
Address: 7352 SANDY BLUFF DRIVE
City-St-Zip: JACKSONVILLE, FL 32211

Title: MGRM () Delete
Name: MULKEY, SHIRLEY
Address: 251 SONDRA COVE TRAIL EAST
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: GRANT, KEVIN
Address: 2729 EGRET WALK TERRACE N.
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM (X) Change () Addition
Name: STEVENSON, WILDRICK
Address: 2815 ARMSDALE ROAD
City-St-Zip: JACKSONVILLE, FL 32218

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

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

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 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: KEVIN B GRANT

MR

05/17/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date