2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2005
Secretary of State

DOCUMENT# P00000053548

Entity Name: QUANTUM CAPITAL PARTNERS III, INC.

Current Principal Place of Business:

339 S PLANT AVE
TAMPA, FL 33606

New Principal Place of Business:

140 FOUNTAIN PARKWAY
SUITE 420
ST. PETERSBURG, FL 33716

Current Mailing Address:

339 S PLANT AVE
TAMPA, FL 33606

New Mailing Address:

140 FOUNTAIN PARKWAY
SUITE 420
ST. PETERSBURG, FL 33716

FEI Number: 59-3678619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMMONS, N. JOHN JR
339 S PLANT AVE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

SIMMONS, N. JOHN JR
140 FOUNTAIN PARKWAY
SUITE 420
ST. PETERSBURG, FL 33716 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: N. JOHN SIMMONS 04/23/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LASHER, STUART G
Address: 339 S PLANT AVE
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete
Name: SIMMONS, N. JOHN JR
Address: 339 S PLANT AVE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LASHER, STUART G
Address: 140 FOUNTAIN PARKWAY SUITE 420
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D (X) Change ( ) Addition
Name: SIMMONS, N. JOHN JR
Address: 140 FOUNTAIN PARKWAY SUITE 420
City-St-Zip: ST. PETERSBURG, FL 33716

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 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: STUART LASHER PRES 04/23/2005
Electronic Signature of Signing Officer or Director Date