

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A99000000793 1. Entity Name GOODYEAR MARKET PLACE, LTD.	
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

05 MAR 10 AM 10:23

Principal Place of Business C/O FRANK A. BUONAURO, JR. 2801 E. IRLO BRONSON HIGHWAY KISSIMMEE, FL 34744	Mailing Address 24 PINE STREET WINDERMERE, FL 34786
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QSS



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

02242005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3578997	Applied For Not Applicable
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5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent BUONAURO, FRANK A JR. 24 PINE STREET WINDERMERE, FL 34786	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$5,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.	
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L99000000767	STREET ADDRESS	
NAME	GOODYEAR SWAP MEET, L.C.	CITY-ST-ZIP	
STREET ADDRESS	24 PINE ST		
CITY-ST-ZIP	WINDERMERE, FL 34786		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

800048862658
 03/22/05 01041 021 **535.00

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

SIGNATURE: *Frank A Buonauro Jr* - **Frank A Buonauro Jr** - 3/7/05 876-3595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #