

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000019584

**Entity Name:** GOODFELLAS HOLDINGS, L.L.C.

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

146 SE BELLA STRANO  
PORT ST LUCIE, FL 34984

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2595  
STUART, FL 34995

**New Mailing Address:**

**FEI Number:** 20-2845545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOMES, KRISTIN D  
146 SE BELLA STRANO  
PORT ST LUCIE, FL 34984 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GOMES, RICHARD J  
**Address:** 146 SE BELLA STRANO  
**City-St-Zip:** PORT ST LUCIE, FL 34984

**Title:** MGRM  
**Name:** MOTTO, MICHAEL III  
**Address:** 3091 SE JAY ST  
**City-St-Zip:** STUART, FL 34994

**Title:** MGRM  
**Name:** MARINELLI, DAVID  
**Address:** 2740 SW MARTIN DOWNS BLVD  
**City-St-Zip:** PALM CITY, FL 34990

I hereby 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:** RICHARD J GOMES

MGRM

01/04/2012

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