

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000083780

FILED
Jan 28, 2008
Secretary of State

Entity Name: GOODYEAR PROPERTY SOLUTIONS, LLC

Current Principal Place of Business:

5364 EHRLICH RD, 399
TAMPA, FL 33624

New Principal Place of Business:

13909 VILLAGE VIEW DR
TAMPA, FL 33624

Current Mailing Address:

5364 EHRLICH RD, 399
TAMPA, FL 33624

New Mailing Address:

13909 VILLAGE VIEW DR
TAMPA, FL 33624

FEI Number: 30-0380878

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENTLEY, NICHOLAS
1202 DOMINGO DR
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

SIMS, JORDAN
3701 CARROLLWOOD PLACE CIRCLE
308
TAMPA, FL 33624 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: JORDAN SIMS

01/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BONANNO, NICHOLAS
Address: 5364 EHRLICH RD, 399
City-St-Zip: TAMPA, FL 33624

Title: MGRM () Delete
Name: BENTLEY, SAMANTHA
Address: 5364 EHRLICH RD, 399
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BONANNO, NICHOLAS
Address: 13909 VILLAGE VIEW DR
City-St-Zip: TAMPA, FL 33624

Title: MGRM (X) Change () Addition
Name: BONANNO, SAMANTHA
Address: 13909 VILLAGE VIEW DR
City-St-Zip: TAMPA, FL 33624

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: NICHOLAS BONANNO

MGRM

01/28/2008

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