2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# L07000102947

Entity Name: GOODLAND HOLDINGS, LLC

Current Principal Place of Business:

502 PARSLEY COURT
KISSIMMEE, FL 34759

New Principal Place of Business:

449 BAY LEAF DRIVE
KISSIMMEE, FL 34759

Current Mailing Address:

502 PARSLEY COURT
KISSIMMEE, FL 34759

New Mailing Address:

449 BAY LEAF DRIVE
KISSIMMEE, FL 34759

FEI Number: 26-0838511 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

E.H.G. RESIDENT AGENTS,INC.
5100 TOWN CENTER CIRCLE, SUITE 430
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

PARSONS, DEBORAH S
449 BAY LEAF DRIVE
KISSIMMEE, FL 34759 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: D PARSONS 04/27/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: DPS ( ) Delete
Name: DAVENPORT, RICHARD A
Address: 16335 MARIPOSA CIRCLE NORTH
City-St-Zip: PEMBROKE PINES, FL 33331

Title: DVP ( ) Delete
Name: DAVENPORT, JAMES S
Address: 18065 SW 82ND AVENUE
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES:

Title: DPS (X) Change ( ) Addition
Name: DAVENPORT, RICHARD A
Address: 15013 SUMMIT PLACE CIRCLE
City-St-Zip: NAPLES, FL 34119

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: RICHARD DAVENPORT P 04/27/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date