

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000089251

Entity Name: KABS GOODWILL LLC

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2806 E. BEARSS AVE.  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

2806 E. BEARSS AVE.  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number: 80-0270127

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ADEYANJU-ISHOLA, ADETOLA O  
10109 VISTA POINTE DR  
TAMPA, FL 33635 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: ADEYANJU-ISHOLA, ADETOLA  
Address: 10109 VISTA POINTE DR  
City-St-Zip: TAMPA, FL 33635

Title: MGRM  
Name: ISHOLA, KOLAWOLE I  
Address: 17918 BURNT OAK LN  
City-St-Zip: LITHIA, FL 33547

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: ADETOLA ADEYANJU-ISHOLA

MGRM

04/12/2012

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