

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000000767

1. Entity Name
GOODYEAR SWAP MEET, L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -7 PM 12:52

Principal Place of Business
2801 E. IRLO BRONSON HIGHWAY
KISSIMMEE FL 34744

Mailing Address
2801 E. IRLO BRONSON HIGHWAY
KISSIMMEE FL 34744-5604



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
24 PINE ST.

DO NOT WRITE IN THIS SPACE

City & State
WINDERMERE, FL.

Zip
34786

Country
ORANGE

4. FEI Number
59-3557318

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BUONAURO, FRANK A
2801 E. IRLO BRONSON HIGHWAY
KISSIMMEE FL 34744

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

MGR
BUONAURO, FRANK A JR.
2801 E. IRLO BRONSON HIGHWAY
KISSIMMEE FL 34744

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

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TITLE
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CITY- ST- ZIP

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CITY- ST- ZIP

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11. 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 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: Frank A. Buonauri
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

2-4-00 407-876-3595
Date Daytime Phone #

CR2E083 (9/99)