2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT #L99000000767

GOODYEAR SWAP MEET, L.C.



FILED Apr 11, 2008 8:00 am Secretary of State

03-25-2008 90083 024 ***143.75

697

Principal Place of Businers

2801 E. IRLO BRONSON HIGHWAY

KISSIMMEE, FL 34744

Mailing Address

24 PINE ST.

WINDERMERE, FL 34786



01162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3557318

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Nam ; and Address of Current Registered Agent

BUONAURO, FRANK A 24 PINE ST. WINDERMERE, FL 34786

DO NOT WRITE IN THIS SPACE

The above named ently submits this statement for the purpose of changing the obligations of registered agent.	ng its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Songture, type for primed name of registered spars and trie 6 spokcapie.	(NOTE: Regulatered Agent argniture required when regulating)	DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUONAURO, FRANK A JR. 2801 E. IRLO BRONSON HIGHWAY KISSIMMEE, FL 34744	
TITLE NAME STREET ADDRESS CITY-ST-ZP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 comp. my or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: