


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

04-02-2008 90154 016 ***143.75

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DOCUMENT # L99000001891	
1. Entity Name GOODYEAR OPEN AIR, L.C.	

Principal Place of Business 111 N. ORANGE AVENUE, SUITE 1200 ORLANDO, FL 32801	Mailing Address 24 PINE STREET WINDERMERE, FL 34786
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30003719



01162008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3567809	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BUONAURO, FRANK A JR. 24 PINE STREET WINDERMERE, FL 34786

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, type, or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when renewing) **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 SHAMS, MAURICE 111 N. ORANGE AVENUE, SUITE 1200 ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUONAURO, FRANK A 24 PINE ST. WINDERMERE, FL 34786
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Frank A. Buonauaro - Mgr* **4-9-08** **407-876-3595**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #