

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000034

Entity Name: GOOD IDEAS, LLC

FILED
Feb 05, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 502880
ST. THOMAS, VI 00805

New Principal Place of Business:

1490 N E PINE ISLAND ROAD
BUILDING 5
CAPE CORAL, FL 33909

Current Mailing Address:

1490 N E PINE ISLAND ROAD
BUILDING 5
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 66-0634852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLLINS, ANTHONY V
1490 N E PINE ISLAND ROAD
BUILDING 5
CAPE CORAL, FL 33909 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: MGR () Delete
Name: COLLINS, ANTHONY V
Address: 1490 N E PINE ISLAND ROAD
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COLLINS, ANTHONY V
Address: 1490 N E PINE ISLAND ROAD BUILDING 5
City-St-Zip: CAPE CORAL, FL 33909

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY V. COLLINS

MGR

02/05/2007

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