

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000071083

**Entity Name:** GOODWILL INVESTMENTS, LLC

**Current Principal Place of Business:**

4901 FELLOES COVE AVENUE  
KISSIMMEE, FL 34744

**Current Mailing Address:**

4901 FELLOES COVE AVENUE  
KISSIMMEE, FL 34744 US

**FEI Number:** 45-2588977

**Certificate of Status Desired:** No

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

BUSTAMANTE, DAVID  
4901 FELLOES COVE AVENUE  
KISSIMMEE, FL 34744 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name BUSTAMANTE, DAVID  
Address 4901 FELLOES COVE AVENUE  
City-State-Zip: KISSIMMEE FL 34744

Title MGRM  
Name BUSTAMANTE, ANDREY  
Address 4901 FELLOES COVE AVENUE  
City-State-Zip: KISSIMMEE FL 34744

Title MGRM  
Name BUSTAMANTE, JAIME  
Address 4901 FELLOES COVE AVENUE  
City-State-Zip: KISSIMMEE FL 34744

Title MGRM  
Name BUSTAMANTE, FABIOLA  
Address 4901 FELLOES COVE AVENUE  
City-State-Zip: KISSIMMEE FL 34744

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID BUSTAMANTE

MGRM

02/05/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date