2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P04000015631

Entity Name: MAVERICK ENERGY GROUP, INC.

Current Principal Place of Business:

100 VILLAGE SQUARE CROSSING
SUITE 202
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

100 VILLAGE SQUARE CROSSING
SUITE 202
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 20-1442373 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICHMOND, BARNEY A
100 VILLAGE SQUARE CROSSING
SUITE 202
PALM BEACH GARDENS, FL 33410 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	CSD	( ) Delete
Name:	RICHMOND, BARNEY A	
Address:	100 VILLAGE SQUARE CROSSING, STE 202	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:	CPD	( ) Delete
Name:	MCCABE, JAMES W	
Address:	P O BOX 2289	
City-St-Zip:	NAPLES, FL 34106	
Title:	VPD	(X) Delete
Name:	BEDNAR, RICHARD J	
Address:	8988 S SHERIDAN, SUITE L #356	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	
Title:	VCFO	(X) Delete
Name:	BOGLE, BRICE E	
Address:	408 N SWEET GUM AVE	
City-St-Zip:	BROKEN ARROW, OK 74012	
Title:	D	(X) Delete
Name:	BOGLE, BRICE E	
Address:	408 N SWEET GUM AVE	
City-St-Zip:	BROKEN ARROW, OK 74012	
Title:	TD	(X) Delete
Name:	TURNER, RICHARD C	
Address:	4200 OAK ST	
City-St-Zip:	PALM BEACH GARDENS, FL 33418	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	TURNER, RICHARD C	
Address:	100 VILLAGE SQUARE CROSSING, STE 202	
City-St-Zip:	PALM BEACH GARDENS, FL 33410	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD C. TURNER T 05/01/2006
Electronic Signature of Signing Officer or Director — Date