

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000039617

Entity Name: U.S. MAVERICK CORP

FILED
Jul 10, 2006
Secretary of State

Current Principal Place of Business:

2201 CEDARWOOD STREET
PORT CHARLOTTE, FL 339481323 US

New Principal Place of Business:

294 DOWNEY DRIVE
PELION, SC 29123 US

Current Mailing Address:

2201 CEDARWOOD STREET
PORT CHARLOTTE, FL 339481323 US

New Mailing Address:

294 DOWNEY DRIVE
PELION, SC 29123 US

FEI Number: 20-2497748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADAMS, CRAIG V
2201 CEDARWOOD STREET
OCALA, FL 339481323 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: P () Delete
Name: ADAMS, CRAIG V
Address: 2201 CEDARWOOD STREET
City-St-Zip: PORT CHARLOTTE, FL 339481323 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ADAMS, CRAIG V
Address: 294 DOWNEY DRIVE
City-St-Zip: PELION, SC 29123 US

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: CRAIG V ADAMS

PRES

07/10/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date