

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037406

FILED  
Feb 06, 2006  
Secretary of State

Entity Name: MAVERICK LAND DEVELOPMENTS, LLC.

**Current Principal Place of Business:**

43824 US HWY 27  
DAVENPORT, FL 33837

**New Principal Place of Business:**

P O BOX 691777  
ORLANDO, FL 32869

**Current Mailing Address:**

P O BOX 691777  
ORLANDO, FL 32869

**New Mailing Address:**

FEI Number: 20-2705882

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KHAWAJA, HAROON  
43824 US HWY 27  
DAVENPORT, FL 33837 US

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

KHAWAJA, HAROON  
P O BOX 691777  
ORLANDO, FL 32869 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: HAROON KHAWAJA

02/06/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MAVERICK ESTATES, IN, C.  
Address: 43824 US HWY 27  
City-St-Zip: DAVENPORT, FL 33837

Title: MGR ( ) Delete  
Name: RUBA HOTEL SYSTEMS,, INC.  
Address: 5820 MEDINAH WAY  
City-St-Zip: ORLANDO, FL 32819

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MAVERICK ESTATES, IN, C.  
Address: P O BOX 691777  
City-St-Zip: ORLANDO, FL 32869

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 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: HAROON KHAWAJA

MGRM

02/06/2006

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