2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015645

TONA, RICHARD

20 HOLLYWOOD BLVD. SE

FT WALTON BEACH, FL 32548

Name:

Address:

City-St-Zip:

Entity Name: MAVERICK AQUATICS LLC

FILED Feb 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 339 BROOKS ST FT WALTON BEACH, FL 32548 **Current Mailing Address: New Mailing Address:** 339 BROOKS ST FT WALTON BEACH, FL 32548 FEI Number: 27-0138984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KASTER, DANIEL 339 BROOKS ST FT WALTON BEACH, FL 32548 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete Name: KASTER Name: Address: 339 BROOKS ST Address: City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: NAGY, SARAH Name: Address: 339 BROOKS ST Address: City-St-Zip: FT WALTON BEACH, FL 32548 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RASOR, TONYA Name: Name: 1634 OAKMONT CIR Address: Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: DANIEL KASTER MMBR 02/27/2008