

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15863

FILED
Jan 07, 2010
Secretary of State

Entity Name: THE MAVRICK HOUSE, INC.

Current Principal Place of Business:

2922 SANTA BARBARA BLVD
GOLDEN GATE, FL 33999

New Principal Place of Business:

Current Mailing Address:

2922 SANTA BARBARA BLVD
GOLDEN GATE, FL 33999

New Mailing Address:

FEI Number: 59-2719205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RESKE, FRANK B
2922 SANTA BARBARA BLVD.
NAPLES, FL 33999 US

Name and Address of New Registered Agent:

RESKE, FRANK B
2922 SANTA BARBARA BLVD.
NAPLES, FL 34116 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

01/07/2010

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: RESKE, FRANK
Address: 2922 SANTA BARBARA BOULEVARD
City-St-Zip: NAPLES, FL 34116

Title: SD
Name: MOSS, MARK
Address: 669 120 STREET N.
City-St-Zip: NAPLES, FL

Title: TD
Name: DUFFY, JOHN
Address: 325 CHARLEMAGNE DR., APT. 107B
City-St-Zip: NAPLES, FL 34112

Title: D
Name: BOULANE, O'DELL
Address: 2928 SANTA BARBARA BLVD
City-St-Zip: NAPLES, FL 34116

Title: D
Name: SIETSAMA, KEN
Address: 4373 20TH AVE. S.W.
City-St-Zip: NAPLES, FL

Title: SD
Name: ROTE, KEN
Address: 426 BROAD AVENUE
City-St-Zip: NAPLES, FL

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRANK RESKE

Electronic Signature of Signing Officer or Director

PRES

01/07/2010

Date