2007 FOR PROFIT CORPORATION

FILED Anr 05. 2007 08:00 Al tate

ANNUAL REPORT				Secretary of St		
DOCU	MENT # P030000870	83		Secretary	01 51	
1. Entity Name BLUE MARAUDER VENTURES, INC.						
BLUE MA	ARAUDER VENTURES, INC.					
Principal Plac	ee of Business	Mailing Address		1		
3533 PINE F	FOREST ROAD	3533 PINE FOREST ROAD				
	IT, FL 32533	CANTONMENT, FL 32533				
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	•	• •		5. Certificate of Status Desired See Required Fee Required		
	6. Name and Address of Current Re	gistered Agent	<u> </u>	, , ,		
CULBERTSON, M.WARREN 3533 PINE FOREST ROAD			1	DO NOT WRITE		
CANTONMENT, FL 32533			1	•		
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		e purpose of changing its register	ed office or register	red agent, or both, in the State of Florida. I am familiar with, a	and accept	
the obligat	tions of registered agent.				ì	
SIGNATURE	Signature, typed or printed name of registered agent and	litte if applicable (NOTE: Registere	id Agent signature required	d when reinstating) , DATE	!	
. 1.					ŧ	
FIL After Ma	E NOW!!! FEE IS <u>\$150.00</u> ay 1, 2007 Fee will be \$550.00	 Election Campaign Fina Trust Fund Contribution. 		ded to Fees		
10. ·	OFFICERS AND DIF	RECTORS	-			
TITLE NAME	D . CULBERTSON, M. MARREN					
STREET ADDRESS	3533 PINE FOREST ROAD			Managananan		
CITY-ST-ZIP	CANTONMENT, FL 32533			U00000692226 04/13/07-80041-808 15	ממי מר	
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CATY-ST-ZIP	* * *:*					
: Illife			1	•		
NAME	, x//					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is fue and accurate and that my 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addless, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

-232-236