

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059024

FILED  
May 11, 2009  
Secretary of State

Entity Name: MARUSAK ACQUISITION INC.

**Current Principal Place of Business:**

645 PONCE DE LEON BLVD.  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

645 PONCE DE LEON BLVD.  
BROOKSVILLE, FL 34601

**New Mailing Address:**

FEI Number: 06-1724050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIRBY, CAROL M  
24050 WINDING CREEK DRIVE  
BROOKSVILLE, FL 34601 US

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

LIWANAG, CAROL M  
24050 WINDING CREEK DRIVE  
BROOKSVILLE, FL 34601 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: CAROL MARUSAK LIWANAG

05/11/2009

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: PD ( ) Delete  
Name: KIRBY, CAROL M VMD  
Address: 24050 WINDING CREEK DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D (X) Delete  
Name: LIWANAG, DANILO J DVM  
Address: 24050 WINDING CREEK DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LIWANAG, CAROL M VMD  
Address: 24050 WINDING CREEK DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: CAROL MARUSAK LIWANAG

PD

05/11/2009

Electronic Signature of Signing Officer or Director

Date