2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081877

Entity Name: MAVERICK INVESTMENTS INCORPORATED

FILED Apr 15, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2223 NE 16TH ST 2223 NE 16TH ST

FORT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33304 US

Current Mailing Address: New Mailing Address:

2223 NE 16TH ST 2223 NE 16TH ST

FORT LAUDERDALE, FL 333304 US

FEI Number: 55-0876404 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:

GIBBS, TOD M 2223 NE 16TH STREET FORT LAUDERDALE, FL 33304 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 GIBBS, TOD M
 Name:
 GIBBS, TOD M

 Address:
 2223 NE 16TH ST
 Address:
 2223 NE 16TH ST

City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: DV () Delete Title: DV (X) Change () Addition
Name: BENSON RODNEY C Name: BENSON RODNEY C

 Name:
 BENSON, RODNEY C
 Name:
 BENSON, RODNEY C

 Address:
 10851 BORN ST
 Address:
 10851 BORN ST

City-St-Zip: THREE RIVERS, MI 49093 City-St-Zip: THREE RIVERS, MI 49093 US

Title: DV () Delete Title: DV (X) Change () Addition Name: BENSON, TINA M Name: BENSON, TINA M

Name: BENSON, TINA M Name: BENSON, TINA M
Address: 10851 BORN ST Address: 10851 BORN ST

City-St-Zip: THREE RIVERS, MI 49093 City-St-Zip: THREE RIVERS, MI 49093 US

Title: DST () Delete Title: DST (X) Change () Addition

Name: GIBBS, NANCY E Name: GIBBS, NANCY E

Address: 1245 MANISTEE RIVER ROAD Address: 1245 MANISTEE RIVER ROAD City-St-Zip: THREE RIVERS, MI 49093 City-St-Zip: THREE RIVERS, MI 49093 US

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 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: TOD M GIBBS P 04/15/2007