


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90310 021 \*\*\*150.00

<b>DOCUMENT # P98000012398</b>		
1. Entity Name MAVERICK BENCH MEDIA COMPANY, INC.		

Principal Place of Business 6910 CONATY ROAD TAMPA, FL 33634	Mailing Address P.O. BOX 15266 TAMPA, FL 33684-5266
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**DO NOT WRITE IN THIS SPACE**



01152006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3507243	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BATEMAN, RICK J 6910 CONATY ROAD TAMPA, FL 33634	
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATEMAN, RICK J <del>2410 SUNSET DRIVE</del> 2924 KNIGHTS AVE TAMPA, FL <del>33620</del> 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANter, GILBERT R 13334 MORAN DR. TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLUP, HAROLD 2211 BODRICK CIRCLE, BLDG 10 UNIT 205 BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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 true 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 empowered 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 address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GILBERT R. MANter

4/10/06

Date

(813) 8800317

Daytime Phone #