

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000115108

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** COMANCHE CONSULTANCY INC.

**Current Principal Place of Business:**

4335 LYNX PAW TRAIL  
VALRICO, FL 33596 US

**New Principal Place of Business:**

**Current Mailing Address:**

4335 LYNX PAW TRAIL  
VALRICO, FL 33596 US

**New Mailing Address:**

**FEI Number:** 20-3872396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, JESSE  
4335 LYNX PAW TRAIL  
VALRICO, FL 33596 US

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

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:** JESSE JOHNSON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** NEALON, JAMES  
**Address:** 105 PINE COURT  
**City-St-Zip:** OLDSMAR, FL 34677 US

**Title:** D  
**Name:** SCALES, TAMMY  
**Address:** 4335 LYNX PAW TRAIL  
**City-St-Zip:** VALRICO, FL 33594 US

**Title:** D  
**Name:** JOHNSON, JESSE  
**Address:** 4335 LYNX PAW TRAIL  
**City-St-Zip:** VALRICO, FL 33594 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JESSE L JOHNSON

D

04/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date