2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2007
Secretary of State

DOCUMENT# P93000013165

Entity Name: COMANCO ENVIRONMENTAL CORPORATION

Current Principal Place of Business:

4301 STERLING COMMERCE DRIVE
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

4301 STERLING COMMERCE DRIVE
PLANT CITY, FL 33566

New Mailing Address:

FEI Number: 65-0398101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, T R
4301 STERLING COMMERCE DRIVE
PLANT CITY, FL 33566 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TOPP, MARK A.
Address: 4301 STERLING COMMERCE DRIVE
City-St-Zip: PLANT CITY, FL 33566

Title: CDST ( ) Delete
Name: JOHNSON, TRACY R.
Address: 4301 STERLING COMMERCE DRIVE
City-St-Zip: PLANT CITY, FL 33566

Title: D ( ) Delete
Name: JOHNSON, ROBERT R
Address: MOLLIE LANE
City-St-Zip: RUSKIN, FL 33573

Title: D/P ( ) Delete
Name: TOPP, MARK A
Address: 4301 STERLING COMMERCE DRIVE
City-St-Zip: PLANT CITY, FL 33566

Title: DST ( ) Delete
Name: JOHNSON, TRACY R
Address: 4301 STERLING COMMERCE DRIVE
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: MARK A. TOPP PD 01/05/2007

Electronic Signature of Signing Officer or Director — Date