## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000013165

Address:

Entity Name: COMANCO ENVIRONMENTAL CORPORATION

FILED Apr 08, 2008 Secretary of State

Entity Nar	me: COMANC	O ENVIRONMENTAL CORP	ORATION			
Current Principal Place of Business:			New Principal Place of Business:			
	RLING COMME TY, FL 33566	RCE DRIVE				
Current Mailing Address:			New Mailing Address:			
	RLING COMME TY, FL 33566	RCE DRIVE				
FEI Number: 65-0398101 FEI		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:			
	I, T R RLING COMME TY, FL 33566	RCE DRIVE US				
	named entity s e of Florida.	ubmits this statement for the	purpose of changing i	ts registered	office or registered agent	, or both,
SIGNATUR	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	TOPP, MARK A.	COMMERCE DRIVE	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	JOHNSON, TRA	COMMERCE DRIVE	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () JOHNSON, ROE MOLLIE LANE RUSKIN, FL 33		Title: Name: Address: City-St-Zip:	JOHNSON, RO	NG COMMERCE DR	
Title: Name: Address: City-St-Zip:	TOPP, MARK A	Delete COMMERCE DRIVE . 33566	Title: Name: Address: City-St-Zip:	HOLMES, LAR	NG COMMERCE DRIVE	
Title: Name:	DST () JOHNSON, TRA	Delete CY R	Title: Name:	V () TOPP, THOMA	K) Change()Addition AS	

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.

Address:

4301 STERLING COMMERCE DR

City-St-Zip: PLANT CITY, FL 33566

SIGNATURE: MARK A TOPP PRES 04/08/2008

4301 STERLING COMMERCE DRIVE

City-St-Zip: PLANT CITY, FL 33566