



**ANNUAL REPORT
OF**

[INSERT CORPORATION NAME]

I. Name

The name of the nonprofit corporation is _____

II. Registered Office and Registered Agent

The address of the corporation's registered office is:

The name of the corporation's registered agent at the above address is:

III. Statement of Corporation Activities

[INSERT A BRIEF STATEMENT DESCRIBING THE ACTIVITIES THE CORPORATION IS ACTUALLY CONDUCTING]

IV. Directors

[INSERT THE NAMES AND RESPECTIVE ADDRESSES, INCLUDING STREET AND NUMBER, IF ANY, OF THE DIRECTORS AND OFFICERS OF THE CORPORATION]



The directors and officers of the corporation and their respective addresses are:

I, the undersigned, affirm that I have read this Annual Report, know and acknowledge the contents, and believe the statements contained within to be true. I understand that if I make a false statement, I may be subject to criminal penalties.

Signature

Date

Title

Printed Name



Approved by Tax Administrator: _____

Date: _____

Comanche Nation Tax Commission Office Use Only:

RECEIVED BY: _____

DATE: _____

Information verified by: _____ on this date: _____

Application fee paid, check number: _____

Approved on this date: _____

Approval sent to applicant on this date: _____