

1.) CORPORATION NAME:

DUE DATE: **1/31/2011**

**LONG RANGE CONSULTING INCORPORATED**

SCC ID NO: **07186596**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR  
PETER J MICHAL  
5212 COBBLE HILL RD  
PORTSMOUTH, VA 23703**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**PORTSMOUTH CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5212 COBBLE HILL RD

CITY/ST/ZIP: PORTSMOUTH, VA 23703-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: PETER J MICHAL  
TITLE: DIRECTOR  
ADDRESS: 5212 COBBLE HILL RD  
CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703-

OFFICER  DIRECTOR

NAME: PETER MICHAL 5212 COBBLE HILL RD  
TITLE: PRESIDENT  
ADDRESS: 5212 COBBLE HILL RD  
CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703-

OFFICER  DIRECTOR

NAME: PETER MICHAL 5212 COBBLE HILL RD  
TITLE: PRESIDENT  
ADDRESS: 5212 COBBLE HILL RD  
CITY/ST/ZIP/CO: PORTSMOUTH, VA 23703-

OFFICER  DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ PETER J MICHAL

PETER J MICHAL, DIRECTOR

3/7/2011

SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE  
TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.