

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000006256 (0)

1. Corporation Name
NATIONAL DISASTER CONSULTANTS, INC.




Principal Place of Business 802 S 10 ST WAITE PARK MN 56387	Mailing Address 802 S 10 ST WAITE PARK MN 56387-1766
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2. Principal Place of Business 21 610 11th AVE. S. Suite, Apt. #, etc. 22 City & State 23 MPLS, MN Zip 24 55413 Country 25 U.S.A.		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 12/26/1995	3a. Date of Last Report 03/15/1996
		4. FEI Number 58-2215812		Applied For Not Applicable	
		5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

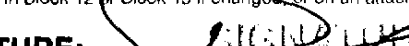
9. Name and Address of Current Registered Agent BARTHELEMY, TIMOTHY H 257 EAGLE DRIVE-FAIRWAY UNIT SAN DESTIN RESORT DESTIN FL 32541		10. Name and Address of New Registered Agent 81 Name DANIEL P. HURT 82 Street Address (P.O. Box Number is Not Acceptable) 200 SANDESTIN LANE 83 # 1205 84 City DESTIN FL 85 Zip Code 32541	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) 4/22/97 DAY

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCST BARTHELEMY, TIM 1241 8TH AVENUE NORTH ST. CLOUD MN 56303 <input type="checkbox"/> DELETE	1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	VILE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TIMOTHY BARTHELEMY 802 S 10 ST WAITE PARK, MN 56387
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARTHELEMY, TIM 1241 8TH AVENUE NORTH ST. CLOUD MN 56303 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	VILE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition GREG WATSON 200 SANDESTIN LANE DESTIN, FLORIDA 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	PRESIDENT/CEO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DANIEL HURT 200 SANDESTIN LANE DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE  4/22/97 944-122-9120

CR2E034 (9/96)