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FILED
Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F96000002838 (8)

1. Corporation Name
THE CHATHAM CONSULTING GROUP, INC.



Principal Place of Business: **9400 NORTH CENTRAL EXPRESSWAY SUITE 1675 DALLAS TX 75231-5027**
 Mailing Address: **9400 NORTH CENTRAL EXPRESSWAY SUITE 1675 DALLAS TX 75231-5045**

2. Principal Place of Business
 21 **8750 N. Central Expressway**
 Suite, Apt. #, etc.
 22 **Suite 900**
 City & State
 23
 Zip Country
 24 **75231** 25

2a. Mailing Address
 26 **8750 N. Central Expressway**
 Suite, Apt. #, etc.
 27 **Suite 900**
 City & State
 28
 Zip Country
 29 **75231** 30

3. Date Incorporated or Qualified: **06/06/1996**
 3a. Date of Last Report
 4. FEET Number: **75-2566067** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
NRAI SERVICES, INC.
528 EAST PARK AVENUE
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
 B1 Name
 B2 Street Address (P.O. Box Number is Not Acceptable)
 B3
 B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____ DATE _____
Signature, typed or printed name of registered agent, if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RAWLINS, PHILIP N	
STREET ADDRESS	9400 NORTH CENTRAL EXPRESSWAY SUITE 1675	
CITY-ST-ZIP	DALLAS TX 75231-5027	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LEA, WENDY S	
STREET ADDRESS	9400 NORTH CENTRAL EXPRESSWAY SUITE 1675	
CITY-ST-ZIP	DALLAS TX 75231-5027	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GROSS, DIANE	
STREET ADDRESS	9400 NORTH CENTRAL EXPRESSWAY SUITE 1675	
CITY-ST-ZIP	DALLAS TX 75231-5027	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	8750 N. Central Expressway Suite 900
1.4 CITY-ST-ZIP	75231
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	8750 N. Central Expressway Suite 900
2.4 CITY-ST-ZIP	75231
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	8750 N. Central Expressway Suite 900
3.4 CITY-ST-ZIP	75231
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 _____ DATE _____

CP2E034 (9/96)