

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003393

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** INDIAN LAW RESOURCES CENTER, INC. (THE)

**Current Principal Place of Business:**

602 N. EWING STREET  
HELENA, MT 59601

**New Principal Place of Business:**

**Current Mailing Address:**

602 N. EWING STREET  
HELENA, MT 59601

**New Mailing Address:**

**FEI Number:** 52-1121079      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

FOGT, THOMAS A  
700 COLORADO AVENUE  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: COULTER, ROBERT T  
Address: 602 N. EWING STREET  
City-St-Zip: HELENA, MT 59601

Title: S ( ) Delete  
Name: LEWIS, JOHN D B  
Address: 99 HUDSON STREET  
City-St-Zip: NEW YORK, NY 10013

Title: T ( ) Delete  
Name: JOHN, PETER  
Address: 20 N WACKER DR SUITE 2100  
City-St-Zip: CHICAGO, IL 60606

Title: C ( ) Delete  
Name: GAIASHKIBOS, MR  
Address: 3221 SOUTH 28TH STREET  
City-St-Zip: LINCOLN, NE 68502

Title: D ( ) Delete  
Name: ROUSH, G J  
Address: 2542 NW NORTHRUP STREET  
City-St-Zip: PORTLAND, OR 97210

Title: D ( ) Delete  
Name: JAMIESON, LUANN  
Address: 7182 MEADVILLE ROAD  
City-St-Zip: BASOM, NY 14013

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MASTEN, SUSAN  
Address: 285 CARPENTER LANE  
City-St-Zip: HOOPA, CA 95546

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT T. COULTER

P

05/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date