

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P29669 (9)
1. Corporation Name
NATIVE AMERICAN RIGHTS FUND, INC.



Principal Place of Business 1506 BROADWAY BOULDER CO 80302-6217	Mailing Address 1506 BROADWAY BOULDER CO 80302-6217
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3. Date Incorporated or Qualified 06/05/1990	3a. Date of Last Report 06/21/1996
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21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	22. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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4. FEI Number 84-0611876	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input 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 type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	ED	<input type="checkbox"/> DELETE
NAME	ECHOHAWK, JOHN E	
STREET ADDRESS	4660 QUAIL CREEK LANE	
CITY-ST-ZIP	BOULDER CO 80301	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	ROREX, CLELA	
STREET ADDRESS	311 BUCHANAN COURT	
CITY-ST-ZIP	LOUISVILLE CO 80027	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RAMIREZ, RAY	
STREET ADDRESS	1823 SPRUCE AVE.	
CITY-ST-ZIP	LONGMONT CO 80501	
TITLE	DO	<input type="checkbox"/> DELETE
NAME	PROSSER, MARY LU	
STREET ADDRESS	13330 BRIARWOOD DRIVE	
CITY-ST-ZIP	BROOMFIELD CO	
TITLE	LM	<input type="checkbox"/> DELETE
NAME	GOTTSCHALK, KIM J	
STREET ADDRESS	2887 HUMBOLDT CIR.	
CITY-ST-ZIP	LONGMONT CO	
TITLE	LM	<input type="checkbox"/> DELETE
NAME	KNIGHT, YVONNE	
STREET ADDRESS	1268 WESTVIEW DR.	
CITY-ST-ZIP	BOULDER CO 80303	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)