2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P29669

FILED Sep 05, 2002 Secretary of State

Entity Name: NATIVE AMERICAN RIGHTS FUND, INC.

	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
1506 BRO BOULDEF	ADWAY R, CO 803026:	217			
Current Mailing Address:			New Mailing Addres	ss:	
1506 BRO BOULDEF	ADWAY R, CO 803026:	217			
FEI Number	: 84-0611876	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOU	PORATION SY TH PINE ISLA ION, FL 3332	ND RD.			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ED (ECHOHAWK, 4660 QUAIL C BOULDER, CO	REEK LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (ROREX, CLEL 311 BUCHANA LOUISVILLE, (N COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (RAMIREZ, RAY 1823 SPRUCE LONGMONT, C	AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DO (PROSSER, MA 13330 BRIARV BROOMFIELD	WOOD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LM (GOTTSCHALK 2887 HUMBOL LONGMONT, C	DT CIR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
	LM () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLELA ROREX TD 09/05/2002

BABBY, LORNA LM 3132 5TH STREET BOULDER, CO 80304