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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P39693

(7)

ARROW, AMERICAN INDIAN CHARITY, INC.

| Principal Place of Business Mailing Address | | | | | | | | | <u> ((()) () () () () () () () </u> | O IBLIO ALIVO POLODI | NI DIEN GIGH | | IBNI BLANI IBAL | |
|--|--|--|----------------------------|--|---|---------------|---|-----------------|--|----------------------|--------------|--------------------|---------------------|--|
| 1000 CONNECTICUT AVE., N.W. 1000 CONNECTICUT AVE., | | | | | N.W. | N.W. | | | 3. Date incorporated | d or Oualified | | | | |
| WASHINGTON DC 20036 WASHINGTON DC 20036 | | | | | | | | | 07/20/199 | _ | | | | |
| | | | | | | | | t | 4. FEI Number | <u> </u> | | Ā | oplied For | |
| | | | | | | | | ľ | 53-021864 | 7 | | | ot Applicable | |
| 2. Principal Place of Business | | | | 2a. Mailing Address | | | | | 5. Certificate of State | | X | \$8.75 | Additional | |
| 21 | | | | 26 | | | | | | | | | equired | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | 6. Election Campaig | _ | | \$5.00 | | |
| City & State | | | | City & State | | | | | Trust Fund Contril | | | Added to | | |
| 23 | | | | 28 | | | | | 7. Is this nonprofit corporation a homeowners association? | | | | | |
| Zip | p Country | | | Zip Cou | | | | | 8. This corporation of | wes or has pai | d the curre | ent year in | tangible | |
| 24 | 25 | | | 29 30 | | | | | Personal Property | • | _ | | No | |
| | and Address of Current | | | | 10. Name and Address of New Registered Ag | | | | | | | | | |
| | | | | | | 81 | Name | | | | | | | |
| JOHNSON, FRANKLYN | | | | | | 62 | Street Address (P.O. Box Number is Not Acceptable | | | | ie) | | | |
| 26371 HICKORY BLVD. BONITA SPRINGS FL 33923 | | | | | | 83 | | | | | | | | |
| BUNHA | | | 85 | | | | | | | | | | | |
| | • | | | | | 84 | City | | | | FL | 85 Zip | Code | |
| 11. Pursuant | to the provisi | ons of Sections 617.0502 | and 617 | .1508, Florida Statute | es, the at | bove | -named | corpora | tion submits this state | ement for the pr | urpose of r | hanging i | ts registered | |
| office or r | eg iste red ag m fam iliar wit | ent, or both, in the State in the and accept the obligation. | of Florida tions of, \$ | Such change was a Section 617.0503, Fig | uthorize rida Stat | d by tutes | the corp s. | poration' | 's board of directors. | I hereby accep | t the appoi | intment as | registered | |
| SIGNATURE | *** | | | | | | | | | | | | | |
| | Signature, typed | or printed name of registered ager | | | | d Age | nt signature | e required w | vhen reinstating) | | DATE | | | |
| 12. | - OD | OFFICERS AND | DIRECT | ORS KX DELETE | 13. | T1.5 | | D | ADDITIONS/CHANG | GES TO OFFICI | | OIRECTOR Change | | |
| TITLE | SD LEADING | EIGHTED EVELVAL | | E A DELETE | 1.1 T/ | | | P Tri | mble, Charl | es E. | L | | K X Addition | |
| NAME PERFECT ADDRESS ! | NAME LEADING FIGHTER, EVELYN STREET ADDRESS 3110 MT VERNON AVE #1105 | | | 1.2 N | | | ADORESS | 719 S. 75th St. | | | | | | |
| CITY-ST-ZIP | ALEXAN | | • | | | | T-ZIP | | ha, NE 681 | - | | |) | |
| TITLE | VD | <u> </u> | | XX DELETE | 2.1 TI | | 1-54 | S | · · · · · · · · · · · · · · · · · · · | | | Change | & Addition | |
| NAME | ZUNI, M | ICHAEL SR | | | 2.2 N | AME | | McK | eag, Jana | | | | | |
| STREET ADDRESS | P 0 B0 | K 947 N/A | | | 2.3 S | TREET | ADDRESS | 1 | Queen Stre | et | | | Ì | |
| CITY-ST-ZIP | ZUM NE | <u></u> | | | 2.40 | ITY-5 | ST-ZIP | Ale | xandria. VA | 22314 | | | | |
| TITLE | X | | | ☐ DĒLĒTĒ | 3.1 TI | | | J <u>V</u> | | | X | X Change | Addition | |
| NAME | | , DOLORES | | | 3.2 N/ | | | | rick, Dolor | | | | | |
| STREET ADDRESS | | ONACO PKWY. | | | 1 | | ADDRESS | | 5 Monaco St | - | | | | |
| CITY-ST-ZIP TITLE | <u>Denver</u> D | <u></u> | -,*- | DELETE | 3.4. C | | ST-ZIP | | ver, CO 80 | 220 | г | Change | Addition | |
| NAME | LAWRY. | MINE | | _ > | 4.1 U | | | T | mambaise C | | _ | | XX | |
| STREET ADDRESS | | OVERHILL RD. | | | | | ADDRESS | | romboise, Co Box 544 | onrad | 21. | ۱. | | |
| CITY-ST-ZIP | BALTIMO | | | | 4.4 CI | | | | | E0/17 | N/ | A | | |
| TITLE | A | | _ | DELETE | 5.1 TI | | | l D | wning, MT ! | | K | X Change | Addition | |
| NAME | GERARD | , Forrest J | | | 5.2 N | | | 1 | ard, Forrest | | | | | |
| STREET ADDRESS | | N PABLO NW | | | 5.3 \$1 | IREET | address | | 1 Don Pablo | | | | | |
| CITY-ST-ZIP | ALBUQU | ERQUE NE | _ | | | | T- ZIP | | uquerque, N | <u>4 87104</u> | | | ¥¥ | |
| TITLE | M | ****** | | DELETE | 6.1 TI | | | D | rajorajo ir s | | L | Change | Addition | |
| NAME | | HAZEL E | | *** | 6.2 N/ | | | | uch, James A | | •, - | | | |
| STREET ADDRESS | | INNECTICUT AVE NV | 7 SIE 1 | 206 | 6.3 51 | REET | ADDRESS | [145] | l River Park | Dr.; Si | ute 2 | 20 | - | |

14. I 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.

(20)

(202) 296-0685

FILED

May 20 1998 8:00am

Secretary of State

Continued, ARROW BOARD OF DIRECTORS

N/A

Trahant, Mark N.
PO Box 70
Seattle, WA 98111

X Addition

D Ryburn, Jerry 3705 Don Isidro, NW

Albuquerque, NM 87107

X Addition