



STATE OF ARIZONA
CORPORATION COMMISSION



NONPROFIT CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE
FOREIGN / DOMESTIC

FOR FISCAL YEAR ENDING 12/31/1995

DUE ON OR BEFORE 04/15/1996

The following information is required by A.R.S. §10-1081 for all domestic and foreign nonprofit corporations authorized to conduct affairs in Arizona. The Commission's authority to prescribe this form is A.R.S. §10-1092. MAKE CHANGES OR CORRECTIONS WHERE NECESSARY.

Corporation File: -0064812-8
Corporation Name: SUN CITY MEN'S GOLF ASSOCIATION
Address: PO BOX 2457

City, State, Zip: SUN CITY
Domicile: ARIZONA
Type: NON-PROFIT

AZ 85372-

Arizona Statutory Agent: DENNIS H PIKE
Street Address: 10210 110TH AVE
(NOT P.O. BOX)

City, State, Zip: SUN CITY

AZ 85351-

1. Check the one category below which best describes the CHARACTER OF AFFAIRS conducted by your corporation in Arizona.

- | | | |
|---|---|---|
| 1. <input type="checkbox"/> Charitable | 8. <input type="checkbox"/> Social | 15. <input type="checkbox"/> Agricultural |
| 2. <input type="checkbox"/> Benevolent | 9. <input type="checkbox"/> Fraternal | 16. <input type="checkbox"/> Horticultural |
| 3. <input type="checkbox"/> Educational | 10. <input type="checkbox"/> Literary | 17. <input type="checkbox"/> Animal Husbandry |
| 4. <input type="checkbox"/> Civic | 11. <input type="checkbox"/> Cultural | 18. <input type="checkbox"/> Homeowners' Association |
| 5. <input type="checkbox"/> Patriotic | 12. <input checked="" type="checkbox"/> Athletic | 19. <input type="checkbox"/> Professional, commercial, industrial, or trade association |
| 6. <input type="checkbox"/> Political | 13. <input type="checkbox"/> Science/Research | 20. <input type="checkbox"/> Other |
| 7. <input type="checkbox"/> Religious | 14. <input type="checkbox"/> Hospital/Health Care | |

ACC USE ONLY	
Fee	\$ 10
Penalty	\$
Total	\$

2. NUMBER OF EMPLOYEES: Please check one. (For statistical purposes only.)

25 or Less ☒ 26 - 100 ☐ 101 - 500 ☐ Over 500 ☐

3. -- If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below --
-- and PRESIDENT or VICE PRESIDENT must sign page 4 of this report. --

I, (individual) or We, (corporation) having been designated the new Statutory Agent, do hereby consent to this appointment until my removal or resignation pursuant to law.

Statutory Agent Name

Address

Signature

City, State, Zip

4. Foreign Corporations list Address in Domicile Jurisdiction:

Street/P. O. Box

City, State, (Country) Zip

-- PLEASE MAKE CORRECTIONS ON A SEPARATE SHEET --

5. **OFFICERS** (If no changes since last report, check here and go on to Section 6.)

PRESIDENT: JOHN SHORT

Address: 17607 LIME ROCK DR

SUN CITY, AZ 85351-

Date taking office: 01-01-93

VICE PRESIDENT: BILL PRINGLE

Address: 10402 CAMEO DR

SUN CITY, AZ 85351-

Date taking office: 01-01-93

SECRETARY: TOM NELSON

Address: 10531 SARATOGA CIR

SUN CITY, AZ 85351-

Date taking office: 01-01-93

TREASURER: ROBERT BURKHOLDER

Address: 11135 W HATCHER

SUN CITY, AZ 85351-

Date taking office: 01-01-92

6. **DIRECTORS** (If no changes since last report, check here and go on to Section 7.)

NAME: JOE ADWELL

Address: 17853 WILLOWBROOK DR

SUN CITY, AZ 85373-

Date taking office: 01-01-93

NAME: LEROY DAVIS

Address: 16022 110TH AVE

SUN CITY, AZ 85351-

Date taking office: 01-01-91

NAME: KARL DAHL

Address: 17402 LINDGREN AVE

SUN CITY, AZ 85373-

Date taking office: 01-01-91

NAME: CLYDE SCOTT

Address: 12421 N 105TH AVE

SUN CITY, AZ 85351-

Date taking office: 01-01-91

5. OFFICERS:

PRESIDENT: DON WALLACE

ADDRESS: 10559 W. CONNECTICUT DR.
SUN CITY AZ 85351

DATE TAKING OFFICE: 01-01-96

SECRETARY: JAMES JENNINGS

ADDRESS: 10829 MIMOSA DRIVE
SUN CITY, AZ 85373-1529

DATE TAKING OFFICE: 01-01-96

VICE PRESIDENT: THOMAS PULS

ADDRESS: 9522 W. LONG HILLS
SUN CITY, AZ 85373
01-01-96

TREASURER: L.W. SCHNURRENBERGER

ADDRESS: 14432 CAMEO POINT
SUN CITY, AZ 85351-2226
01-01-96

6. DIRECTORS:

NAME: JACK DAIL
ADDRESS: 10238 W. WHITE MOUNTAIN
SUN CITY, AZ 85351

DATE TAKING OFFICE: 01-01-96

NAME: ROBERT DAVIS
ADDRESS: 10450 W. BROOKSIDE DR.
SUN CITY, AZ 85351
DATE TAKING OFFICE: 01-01-96

NAME: BOB KING
ADDRESS: 10826 W. ABBOTT
SUN CITY, AZ 85351

01-01-96

NAME: JOHN BATAGLIA
14213 TUMBLEBROOK WAY
SUN CITY, AZ 85351
01-01-96

SUN CITY MEN'S GOLF ASSOCIATION
TREASURER'S REPORT
JANUARY 1, 1995 THRU DECEMBER 31, 1995

CASH ON HAND JANUARY 1, 1995

\$ 60,530.80

CASH RECEIPTS

1995 DUES	\$ 7,465.00
1996 DUES	47,025.00
SWEEPS	2,630.00
TOURNAMENT PROCEEDS	8,010.00
INTEREST	485.06
CONTRIBUTIONS	25.00

TOTAL RECEIPTS

65,640.06

\$126,170.86

CASH DISBURSEMENTS

AGA DUES	\$ 33,924.00
WAGES	17,066.28
TOURNAMENT PAYOUT	7,660.00
ANNUAL MEETING	3,489.55
FICA/MED TAXES	2,827.44
PRINTING	877.75
PLAQUES (LAKES WEST/QUAIL RUN)	217.23
OCTAGENARIUM TOURNAMENT	200.00
STATE/FED. UNEMPLOYMENT TAX	194.04
STATE COMPENSATION FUND	121.00
SURETY BOND	100.00
DUES - REFUNDS	75.00
POST OFFICE BOX RENTAL	58.00
SUPPLIES/STAMPS	48.35
BANK CHARGES	33.35
ANNUAL CORPORATION FEE	10.00

TOTAL DISBURSEMENTS

\$ 66,901.99

FUND AVAILABILITY DECEMBER 31, 1995

\$ 59,268.87



ROBERT G. DAVIS, TREASURER

SCMGA TREAS MAR

SUN CITY MEN'S GOLF ASSOCIATION

TREASURER'S REPORT
MARCH 31, 1996

FUND AVAILABILITY, FEBRUARY 29, 1995

\$35,251.16

MARCH CASH RECEIPTS

1996 DUES	\$850.00
SWEEPS	\$220.00
INTEREST ON SAVINGS	\$32.05
TOURNAMENT PROCEEDS	\$1,008.00
MISC.	\$30.00

\$2,140.05

TOTAL RECEIPTS

MARCH DISBURSMENTS

WAGES	\$1,422.19
PAYROLL TAXES	\$235.62
TOURNAMENT PAYOUT	\$952.00
SUPPLIES	\$32.00
PRINTING	\$355.27
MISC.	\$47.59

\$3,044.67

TOTAL DISBURSMENTS

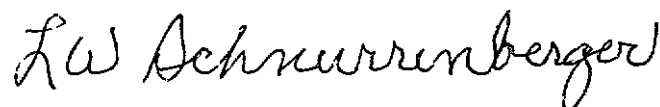
FUND AVAILABILITY MARCH 31, 1996

\$34,346.54

CHECKING ACCOUNT:
SAVINGS ACCOUNT\$14,106.56
\$20,239.98

\$34,346.54

L.W.SCHNURRENBERGER, TREASURER



8.A. CERTIFICATE OF DISCLOSURE (A.R.S. §10-1084)

Has any person serving either by election or appointment as officers, directors, trustees, or incorporators:

1. Been convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate;
2. Been convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven year period immediately preceding execution of this certificate;
3. Been or are subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven year period immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order:
 - (a) involved the violation of fraud or registration provisions of the securities laws of that jurisdiction, or
 - (b) involved the violation of the consumer fraud laws of that jurisdiction, or
 - (c) involved the violation of the antitrust or restraint of trade laws of that jurisdiction?

YES _____

NO ✓

If "YES", the following information must be submitted as an attachment to this report for each person subject to one or more of the actions stated in Items 1. through 3. above.

- | | |
|---|---|
| 1. Full name and prior names used. | 5. Date and location of birth. |
| 2. Full birth name. | 6. Social Security Number |
| 3. Present home address. | 7. The nature and description of each conviction or judicial action; the date and location; the court and public agency involved, and the file or cause number of the case. |
| 4. Prior addresses (for immediate preceding 7 year period). | |

8.B. STATEMENT OF BANKRUPTCY (A.R.S. §10-1083)

Are you currently in federal bankruptcy proceedings, and if so, under which chapter of federal bankruptcy law is the action filed and on what date?

Yes _____ Chapter _____ Date Filed _____ Case Number _____ No ✓

9. This report must be executed by the corporation and attested by its president, a vice-president, secretary, assistant secretary or treasurer. (If the corporation is in the hands of a receiver or trustee, it shall be executed on behalf of the corporation.)

I DECLARE, UNDER PENALTY OF LAW, THAT ALL CORPORATE INCOME TAX RETURNS REQUIRED BY TITLE 43 OF THE ARIZONA REVISED STATUTES HAVE BEEN FILED WITH THE ARIZONA DEPARTMENT OF REVENUE.

I further declare under penalty of law that I (we) have examined this report and the certificate, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.

By LWS Schuurman Bergen Date 7/11/96 By _____ Date _____

Title Treasurer Title _____