



STATE OF ARIZONA
CORPORATION COMMISSION
CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE



DUE ON OR BEFORE 04/27/1998

FILING FEE \$10.00

The following information is required by A.R.S. §10-1622 & §10-2501 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §10-121.A. & §10-2545.A. **YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM.** Make changes or corrections where necessary. See instructions for proper format. **REFER TO THE INSTRUCTIONS ON PAGE 4.**

RECEIVED

MAR 09 1998

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION
-0521471-5

Corporation File Number:

Business Phone: (602) 979-0080 (Business phone is optional.)
State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

1. SPIRIT OF HOPE UNITED METHODIST CHURCH
14403 N 75TH AVE
PEORIA, AZ 85381

2. Arizona Statutory Agent: I DOUGLAS DUNIPACE
Street Address: 2 N CENTRAL AVE
(NOT P.O. BOX)
City, State, Zip: PHOENIX AZ 85004-

PAID

ACC USE ONLY

Fee \$ 10
Penalty \$
Reinstate \$
Expedite \$
Total \$ 10
FY97-98

If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below.

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

Signature

3. Secondary Address:
(Foreign Corporations are **REQUIRED** to complete this section.)

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

BUSINESS CORPORATIONS

- | | |
|------------------------|-------------------------------------|
| 1. Accounting | 20. Manufacturing |
| 2. Advertising | 21. Mining |
| 3. Aerospace | 22. News Media |
| 4. Agriculture | 23. Pharmaceutical |
| 5. Architecture | 24. Publishing/Printing |
| 6. Banking/Finance | 25. Ranching/Livestock |
| 7. Barbers/Cosmetology | 26. Real Estate |
| 8. Construction | 27. Restaurant/Bar |
| 9. Contractor | 28. Retail Sales |
| 10. Credit/Collection | 29. Science/Research |
| 11. Education | 30. Sports/Sporting Events |
| 12. Engineering | 31. Technology(Computers) |
| 13. Entertainment | 32. Technology(General) |
| 14. General Consulting | 33. Television/Radio |
| 15. Health Care | 34. Tourism/Convention Services |
| 16. Hotel/Motel | 35. Transportation |
| 17. Import/Export | 36. Utilities |
| 18. Insurance | 37. Veterinary Medicine/Animal Care |
| 19. Legal Services | 38. Other |

NON-PROFIT CORPORATIONS

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

5. CAPITALIZATION: (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate.

Number of Shares/Certificates Authorized	Class	Series Within Class (if any)

Number of Shares/Certificates Issued	Class	Series Within Class (if any)

6. SHAREHOLDERS: (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

List shareholders holding more than 20% of any class of shares issued by the corporation, or having more than a 20% beneficial interest in the corporation.

Name: _____ Name: _____

NONE ☒

Name: _____ Name: _____

7. OFFICERS (If no changes since last report, check here _____ and go on to Section 8.)

Name: SCOT LEMON Name: LES BAILEY

Title: PRESIDENT/CEO Title: VICE-PRESIDENT

Address: 6810 W MCKNIGHT LOOP Address: 9709 W GLEN OAKS CIR

GLENDALE, AZ 85308- SUN CITY, AZ 85351-

Date taking office: 01-01-96 Date taking office: 01-01-97

Name: VICKI L VERMIERE Name: _____

Title: SECRETARY Title: ROBERT NILES

Address: 12707 N 73RD AVE Address: 8355 W. VILLAGE DRIVE

PEORIA, AZ 85381- PEORIA, AZ 85382

Date taking office: 10-15-94 Date taking office: 11-1-98

8. DIRECTORS (If no changes since last report, check here _____ and go on to Section 9.)

Name: JEFF PITTS Name: HOWARD GUETHERMAN

Address: 12941 N 74TH LN Address: 10810 N 91ST AVE #129

PEORIA, AZ 85381- PEORIA, AZ 85345-

Date taking office: 01-01-97 Date taking office: 11-18-94

Name: _____ Name: _____

Address: RAY BARKHAUS Address: _____
13250 N. 54TH DRIVE
GLENDALE, AZ. 85304

Date taking office: 11-1-98 Date taking office: _____

SPRIT OF HOPE UMC FINANCIAL STATEMENT
1/1/97 Through 12/31/97

Category	Total		Difference
	Actual	Budget	
INCOME CATEGORIES			
Capital Fund	18,883.00	20,123.00	(1,240.00)
Congregation	79,215.80	88,308.00	(9,092.20)
Designated	30,008.61	21,079.00	8,929.61
Rent	22,170.00	21,050.00	1,120.00
TOTAL INCOME CATEGORIES	150,277.41	150,560.00	(282.59)
EXPENSE CATEGORIES			
Business Exp. (Pastor)	5,663.04	5,663.00	(0.04)
Connectional Outreach	3,209.67	12,205.00	8,995.33
Continuing Education	1,090.31	2,000.00	909.69
FICA	1,518.95	2,400.00	881.05
Fire Protection	399.02	431.00	31.98
Health Insurance	9,006.00	9,378.00	372.00
Housing	11,500.08	11,500.00	(0.08)
Maintenance	7,663.66	0.00	(7,663.66)
Miscellaneous	218.73	0.00	(218.73)
Mortgage	34,300.00	41,400.00	7,100.00
Past/Staff Sal.	54,154.78	48,677.00	(5,477.78)
Pension	2,974.01	4,596.00	1,621.99
Postage	874.29	850.00	(24.29)
Program Ministry	9,040.25	0.00	(9,040.25)
Telephone	1,795.72	2,000.00	204.28
Trash Service	623.77	900.00	276.23
Utilities	4,818.46	3,500.00	(1,318.46)
Utilities (Pastor)	3,000.00	4,500.00	1,500.00
TOTAL EXPENSE CATEGORIES	151,850.74	150,000.00	(1,850.74)
GRAND TOTAL	(1,573.33)	560.00	(2,133.33)

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-2501.A.6)

Only corporations that meet one or more of the following criteria must **attach** a financial statement (balance sheet including assets, liabilities and equity). The corporation is: 1) a **public service corporation** (e.g., public utility) as defined in Article XV, Section 2, Constitution of Arizona. 2) offers its **stock for sale** in transactions that are not exempt from A.R.S. §§ 44-1841 and 44-1842 as prescribed in §44-1844.A.1 (e.g., publicly traded). 3) a **nonprofit corporation**. All other forms of corporations are exempt from filing a financial disclosure.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-2505.A)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation been:

1. 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. 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. 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 involved the violation of:

- (a) fraud or registration provisions of the securities laws of that jurisdiction, or
- (b) the consumer fraud laws of that jurisdiction, or
- (c) the antitrust or restraint of trade laws of that jurisdiction?

One box must be marked:

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). | |

11. STATEMENT OF BANKRUPTCY (A.R.S. §10-202.D.2)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 20% of the issued and outstanding common shares or 20% of any other proprietary, beneficial or membership interest in the corporation served in such capacity or held a 20% interest in any other corporation during the bankruptcy, receivership, or charter revocation of the other corporation?

One box must be marked:

YES ☐

NO ☒

If YES, enter the following:

Chapter _____ Date Filed _____ Case Number _____

If "YES", the following information must be submitted as an attachment to this report for each person subject to the statement above.

- (1) The names and addresses of each corporation and the person or persons involved. (2) The state in which each corporation was a) incorporated b) transacted business. (3) The dates of corporate operation.

12. CAUTION: Signature requirements vary according to the type of corporation. See the instruction sheet for specific rules. Annual Reports submitted with incorrect signatures will be rejected.

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.

Name Scot Lemon Date 2-10-98 Name Vicki L. Vermeire Date 2-10-98

Signature [Signature] Signature Vicki L. Vermeire

Title President & Chair of Trustees Title Secretary

(Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)