



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



DUE ON OR BEFORE 10/02/1997

CM FILING FEE \$10.00 SMT ms

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.
REFER TO THE INSTRUCTIONS ON PAGE 4.

1. LITERACY VOLUNTEERS OF COCONINO COUNTY
PO BOX 2432
FLAGSTAFF, AZ 86003

RECEIVED

OCT 05 1998

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

NOV 26 '97
ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

Corporation File Number:

-071618476

Business Phone: _____

(Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

RECEIVED

JUL 22 1998

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

2. Arizona Statutory Agent: JEAN HOCKMAN

Street Address: ~~2187 N VICKY ST~~

(NOT P.O. BOX)

City, State, Zip: ~~FLAGSTAFF~~

~~AZ 86004-~~

ACC USE ONLY

Fee \$ 10

Penalty \$ 4

Reinstate \$ _____

Expedite \$ _____

Total \$ _____

FY97-98

PAID

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

Warren Perkins

1340 N. Rim Dr.
Flagstaff, AZ 86001

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

Address/Stat Agent
Change per AR
Date: 9/11/98 Initials: JP

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

BUSINESS CORPORATIONS

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

NON-PROFIT CORPORATIONS

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

Title: PRESIDENT/CEO Title: VICE-PRESIDENT

Address: 300 W ASPEN Address: 411 JUNIPER
FLAGSTAFF, AZ 86001- FLAGSTAFF, AZ 86001-

Date taking office: 07-01-96 Date taking office: 07-01-96

Name: KEVIN LAXELT OLSON Name: MAURY HERMAN

Title: SECRETARY Title: TREASURER

Address: 451 SHORTO TRL Address: 3 N LEROUX
FLAGSTAFF, AZ 86001- FLAGSTAFF, AZ 86001-

Date taking office: 07-01-96 Date taking office: 07-01-96

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

Name: DAVID VASELAAR Name: JEAN HOCKMAN

Address: 2 E BIRCH Address: 2187 N VICKEY

FLAGSTAFF, AZ 86001- FLAGSTAFF, AZ 86004-

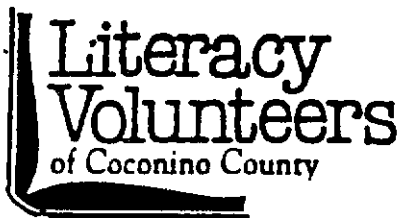
Date taking office: 02-01-92 Date taking office: 02-01-92

Name: GREG ROYBAL Name: FRANCES HILL

Address: 102 S PARK Address: BOX 6032

FLAGSTAFF, AZ 86001- FLAGSTAFF, AZ 86011-

Date taking office: 04-01-95 Date taking office: 06-01-96



Board of Directors 1997-98

Warren Perkins, President
MD, Family Practice
13450 N. Rim
Flagstaff, AZ 86001

Maury Herman, Treasurer
Coast and Mountain Properties
3 N. Leroux
Flagstaff, AZ 86001

Kay Whitaker
Flagstaff Public Library
300 W. Aspen
Flagstaff

Kay McKay
Big Sisters of NAZ
PO BOX 1701
Flagstaff, AZ 86002

Frances Hill
Schools Hotel Rst Mngr
Northern Arizona University
Flagstaff, AZ 86011

Brian Johnson
Flagstaff Live
111 W. Aspen
Flagstaff, AZ 86001

Mary McGroarty, Vice President
PhD, Department of English, NAU
BOX 6032
Flagstaff, AZ 86001

Greg Roybal, Secretary
Arizona Daily Sun
102 S. Park
Flagstaff, AZ 86001

Maria Trillo
Department of Modern Languages
Northern Arizona University
Flagstaff, AZ 86011

Jean Hockman
retired, The Guidance Center
2187 N. Vickey
Flagstaff, AZ 86004

Ana Flores
786 N. Canyon
Flagstaff, AZ 86001



P.O. Box 2432

Flagstaff, Arizona 86003

(520) 556-0313

LITERACY VOLUNTEERS OF COCONINO COUNTY

CASH FLOW REPORT - July 1996 - June 1997

| | BUDGET | YTD TOTAL |
|---------------------------|------------------|------------------|
| CASH RECEIPTS | | |
| United Way/Flagstaff | 14,711.00 | 14,307.49 |
| Transition Found | 3,000.00 | 3,000.00 |
| Coco County | 3,850.00 | 3,850.00 |
| Arts/Science Comm | 2,800.00 | 2,800.00 |
| AZ Arts Comm | 1,800.00 | 1,800.00 |
| US West | 1,500.00 | 1,500.00 |
| RICO | 5,000.00 | 5,000.00 |
| M/Plains Books | 1,000.00 | 0.00 |
| Donations | 1,000.00 | 10,678.44## |
| Training Fees | 1,000.00 | 1,140.00 |
| Spelling Bee | 5,000.00 | 3,465.00 |
| Coco College Reimburse | | 4,179.30 |
| Wells Fargo | | 3,000.00 |
| TOTAL | 40,611.00 | 54,660.23 |
| CASH DISBURSEMENTS | | |
| Salaries | 17,388.00 | 17,683.20 |
| Payroll Tax | 3,500.00 | 5,027.52 |
| Health | 1,135.00 | 1,263.94 |
| Aff Fee. | 180.00 | 0.00 |
| Insurance | 600.00 | 850.00 |
| Supplies/Equip | 500.00 | 1,498.86 |
| Tel/Fax | 1,800.00 | 1,927.51 |
| Post | 1,000.00 | 1,046.06 |
| Print | 750.00 | 423.23 |
| Travel | 250.00 | 722.14 |
| Fundrais | 300.00 | 844.40 |
| Training Mat | 1,000.00 | 812.69 |
| Publications | 400.00 | 796.01 |
| Outreach | 600.00 | 1,896.60 |
| Rent/Util | 1,800.00 | 2,000.00 |
| Health Care | 600.00 | 0.00 |
| Oct Lit Month | 600.00 | 670.00 |
| Literary Read | 5,800.00 | 11,704.25* |
| Misc. | 400.00 | 778.14 |
| TOTAL | 38,603.00 | 49,944.55 |

End Cash Balance \$ 6,555.05
 O/S Checks \$ 258.58
 Balance per Bank \$ 6,813.63

includes reimbursement for literary readings

*to be partially reimbursed

Please Enter Corporation Name: LITERACY VOLUNTEERS OF COCONINO CTY

Page 3

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 KAY WHITAKER Date 10/15/97 Name Dr Warren Perkins Date 11/24/97

Signature Kay Whitaker Signature Warren Perkins

Title BOARD OF DIRECTORS Title President, Board of Directors

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

X Secretary [Signature]

Carey Polyal

7/19/98