



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



DUE ON OR BEFORE 12/11/1998

FILING FEE \$10.00  
KOTMA

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. Information for the report should reflect the current status of the corporation. See instructions for proper format. **REFER TO THE INSTRUCTIONS ON PAGE 4.**

RECEIVED

NOV 30 1998

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

-0108666-8

Corporation File Number:

Business Phone: 520-774-8302 (Business phone is optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: LESLIE BRENNAN  
Street Address: 1140 E APPLE WAY  
(NOT P.O. BOX)  
City, State, Zip: FLAGSTAFF AZ 86001-

ACC USE ONLY

Fee \$10

Penalty \$

Reinstate \$

Expedite \$

Total \$

FY98-99

PAID

Use this box only if appointing a new Statutory Agent

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 of new Statutory Agent

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

NON-PROFIT CORPORATIONS

- 1. Charitable
- 2. Benevolent
- 3. Educational
- 4. Civic
- 5. Political
- 6. Religious
- 7. X Social
- 8. Literary
- 9. Cultural
- 10. Athletic
- 11. Science/Research
- 12. Hospital/Health Care
- 13. Agricultural
- 14. Animal Husbandry
- 15. Homeowner's Association
- 16. Professional, commercial  
industrial or trade association
- 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: ROSANNA TARR

Name: SABRA LOWE ZEDICH

Title: PRESIDENT/CEO

Title: VICE-PRESIDENT

Address: 1207 E HARMONY WAY  
FLAGSTAFF, AZ 86004-Address: 6955 N CHAMBERS RD  
FLAGSTAFF, AZ 86001-

Date taking office: September 21, 1998

Date taking office: September 21, 1998

Name: ROBBIE-NEUMANN Barb Ahern

Name: CINDY HARRIS

Title: SECRETARY

Title: TREASURER

Address: 1807 N DEER-CROSSING 3920 E. Lynch  
FLAGSTAFF, AZ 86004-Address: 2328 CYPRESS DR  
FLAGSTAFF, AZ 86004-

Date taking office: September 21, 1998

Date taking office: September 21, 1998

**8. DIRECTORS** (If no changes since last report, check here \_\_\_ and go on to Section 9.)Name: ~~DR. VERENA BOYLAN MD~~ Rosanna TarrName: ~~JEAN OCHOA~~ Sabra Lowe/ZedickAddress: ~~1050 N SAN FRANCISCO~~ 1207 E. Harmony WayAddress: ~~5250 N HWY 89 #61~~ 6955 N. ChambersFLAGSTAFF, AZ ~~86001~~ 86004FLAGSTAFF, AZ ~~86004~~ 96001

Date taking office: September 21, 1998

Date taking office: Septmeber 21, 1998

Name: BRIGID KRAM Barb Ahern

Name: SHAWN SMITH Cindy Harris

Address: ~~2499 SWEET CLOVER WAY~~ 3920 E. LynchAddress: ~~500 S BEECH~~ 2328 Cypress De.

FLAGSTAFF, AZ 86004-

FLAGSTAFF, AZ 86004-

Date taking office: September 21, 1998

Date taking office: September 21, 1998

Acct	8/31/98 Balance
<hr/>	
ASSETS	
Cash and Bank Accounts	
Birthrite Checking	1,634.60
BIRTHRITE Savings	10,529.73
	<hr/>
TOTAL Cash and Bank Accounts	12,164.33
	<hr/>
TOTAL ASSETS	12,164.33
	<hr/> <hr/>
LIABILITIES & EQUITY	
LIABILITIES	0.00
EQUITY	12,164.33
	<hr/>
TOTAL LIABILITIES & EQUITY	12,164.33
	<hr/> <hr/>

Profit & Loss Statement  
9/1/97 Through 8/31/98

Category Description	9/1/97- 8/31/98
<u>INCOME</u>	
DONATIONS REC'D	4,565.17
DONATIONS SRP	2,385.31
Interest Inc	84.18
NACKARDS	500.00
ST MARY'S	247.32
Walkathon	6,619.78
Uncategorized In...	4,335.43
TOTAL INCOME	<u>18,737.19</u>
<u>EXPENSES</u>	
Ads	1,161.87
Bank Charge	12.00
Clothing	35.00
Education	683.74
FLIERS, BOOKS	186.10
Insurance	-118.50
Insurance, Bus	750.00
Legal-Prof Fees	317.00
Misc	99.04
Office	951.68
POSTAGE	246.44
PREGNANCY TESTS	237.66
Rent	3,175.00
Supplies, Bus	727.84
Telephone	366.40
TELEPHONE ADS	444.80
Telephone, Bus	545.92
Training	270.00
Travel	569.86
Uncategorized Ex...	303.00
TOTAL EXPENSES	<u>10,964.85</u>
TOTAL INCOME - EXPENSES	<u><u>7,772.34</u></u>

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

Only nonprofit corporations must attach a financial statement (balance sheet including assets, liabilities and equity). 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. SIGNATURES**

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 Rosanna Tarr Date 11-17-98 Name Barbara Allen Date 11/23/98  
 Signature Rosanna Tarr Signature BARBARA ALLEN  
 Title President Title Secretary

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