



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



DUE ON OR BEFORE 04/17/1998

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. & §10-254.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.**

1. DOUGLAS ARTS & HUMANITIES ASSOCIATION, INC.
~~1002 11TH ST~~ 2110 13th St
~~DOUGLAS, AZ 85607~~ Douglas AZ 85607

RECEIVED

MAY 22 1998

NOV 24 1998

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

Business Phone: 520-364-3326
State of Domicile: ARIZONA

Corporation File Number:

(Business phone is optional)

Type of Corporation: NON-PROFIT

A.C.C. CORPORATIONS DIV.
RECEIVED

2. Arizona Statutory Agent: ~~BEN F WILLIAMS JR~~
Street Address: ~~1930 11TH ST~~
(NOT P.O. BOX)
City, State, Zip: DOUGLAS

~~ELIZABETH W. AMES~~
2909 E. 9th St
DOUGLAS, AZ 85607

OCT 14 1998

DOCUMENTS ARE SUBJECT
TO REVIEW BEFORE FILING

ACC USE ONLY	
Fee	\$ <u>10.00</u>
Penalty	\$ <u>4.00</u>
Reinstate	\$
Expedite	\$
Total	\$ <u>14.00</u>
FY97-98	

~~No Statutory Agent at this time~~
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.

Elizabeth W. Ames

Signature

2909 E. 9th Street
Douglas Az 85607-2717



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

- | | |
|---|--|
| <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 | ARIZONA CORP COMMISSION
CORPORATIONS DIVISION | RECEIVED
FEB 12 1999 |
| <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 checked="" 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 checked="" type="checkbox"/> 17. Other <u>Restoration of theatre</u> | | |

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: ~~FLOY MAY KING~~ George Xalis Name: ~~GEORGE XALIS~~
Title: ~~PRESIDENT/CEO~~ interim president Title: VICE-PRESIDENT
Address: 1002 11TH ST 540 8TH ST, Address: 540 8TH ST
DOUGLAS, AZ 85607- DOUGLAS, AZ 85607-

Date taking office: 02-14-83 Date taking office: 02-11-92
Name: MARY NOSEK Name: DOROTHY J LONEY
Title: SECRETARY Title: TREASURER
Address: 1022 11TH ST Address: 2110 13TH ST
DOUGLAS, AZ 85607- DOUGLAS, AZ 85607-

Date taking office: 01-00-95 Date taking office: 02-08-84

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

Name: ~~FLOY MAY KING~~ MARY NOSEK Name: DOROTHY J LONEY
Address: 1002 11TH ST Address: 2110 13TH ST
DOUGLAS, AZ 85607- DOUGLAS, AZ 85607-

Date taking office: 02-14-83 Date taking office: 12-01-86
Name: SHIRLEY GREGORY Name: ELIZABETH AMES
Address: PO BOX 3894 Address: 2909 9TH ST
DOUGLAS, AZ 85607- DOUGLAS, AZ 85607-

Date taking office: 02-14-83 Date taking office: 02-14-83

7. STATEMENT OF FINANCIAL CONDITION (Required by A.R.S. §10-1081.A.6.)

You must submit a statement of the corporation's financial condition. Any reasonable schedule will be accepted provided it reflects the intent of the law, as determined by the Commission. Several suggestions for information you may submit to satisfy this requirement include the following:

- Attach a copy of Page 2, Form 99 filed with the Arizona Department of Revenue; OR
- a copy of the corporation's Charitable Organization Financial Statement as filed with the Arizona Secretary of State pursuant to A.R.S. §44-6552; OR
- a copy of your treasurer's report (or financial statement) prepared for this fiscal year; OR
- a copy of the financial statement you prepare for the benefit of your members; OR
- You may simply use the Balance Sheet below.

BALANCE SHEET

ASSETS

Current Assets:

Cash	<u>\$4,862.47</u>	
Trade notes and accounts receivable (less allowance for bad debts)	_____	
Inventories	_____	
Other current assets	_____	
Total Current Assets		<u>\$ 4,862.47</u>
Land, buildings and other fixed assets (net of accumulated depreciation)	<u>1.00</u>	
Other assets	_____	
Total Assets		<u>\$ 4,863.47</u>

LIABILITIES

Current Liabilities:

Accounts Payable	\$ _____	
Mortgages, notes, bonds (payable in less than 1 year)	_____	
Other current liabilities	<u>1.00</u>	
Total Current Liabilities		<u>1.00</u>
Mortgages, notes, bonds (payable in more than 1 year)	_____	
Fund Balances:		
Restricted	_____	
Unrestricted	_____	
Total Fund Balances		
Total Liabilities and Fund Balances		<u>\$ 4,862.47</u>

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 George Xalis Date 10/13 Name MARKY E. NOSEK Date 10/13/98

Signature George Xalis Signature Marky E. Nosek

Title President Title SECRETARY

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