



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: -0173102-3  
Corporation Name: SKP KOFA KO-OP RETREAT, INC.  
Address: 3750 E CO 17TH ST

City, State, Zip: YUMA AZ 85365-  
Domicile: ARIZONA  
Type: NON-PROFIT

Arizona Statutory Agent: STEPHEN P SHADLE  
Street Address: 2260 S 4TH AVE #2000  
(NOT P.O. BOX)

City, State, Zip: YUMA AZ 85364-

A.C.C. CORPORATIONS DIV.  
RECEIVED

MAR 11 '96

DOCUMENT SUBJECT  
TO REVIEW

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 type="checkbox"/> Athletic             | 19. <input type="checkbox"/> Professional, commercial,<br>industrial, or trade association |
| 6. <input type="checkbox"/> Political   | 13. <input type="checkbox"/> Science/Research     | 20. <input checked="" type="checkbox"/> Other RY PARK CO-OP                                |
| 7. <input type="checkbox"/> Religious   | 14. <input type="checkbox"/> Hospital/Health Care |  |

ACC USE ONLY	
Fee	\$ _____
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:** GORDON BARRAGER

**Address:** 14330-60 AVE SE

EVERETT, WA 98328-

**Date taking office:** 01-18-94

**SECRETARY:** JOANN PICKRELL

**Address:** 3750 E COUNTY 17TH ST

YUMA, AZ 85365-

**Date taking office:** 01-18-94

**VICE PRESIDENT:** BETTY LABRECQUE

**Address:** 26 FARLEY AVE

IPSWICH, MA 01938-

**Date taking office:** 01-18-94

**TREASURER:** THEDORA DAVIS

**Address:** 2511 SE RIVER RD #73

HILLSBORO, OR 97123-

**Date taking office:** 01-18-94

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

**NAME:** MARY ELLEN BASSETT

**Address:** 18150 FOWLES RD

MIDDLEBURG HTS, OH 44130-

**Date taking office:** 01-18-94

**NAME:** ERWIN BLEHER

**Address:** PO BOX 2010

SPARKS, NV 89432-

**Date taking office:** 01-18-94

**NAME:** LEON EICHENLAUB

**Address:** 1904 HIGHLAND DR

ANACORTES, WA 98221-

**Date taking office:** 01-18-94

**NAME:** MABLE STAMATE

**Address:** 3750 E COUNTY 17TH ST

YUMA, AZ 85365-

**Date taking office:** 01-18-94

PLEASE CHANGE THE FOLLOWING:

1995-1996 Officers & Directors

DATE TAKING OFFICE: 1-16-95

President

Bob Fitch

General Delivery

Polk City, Ia 58226

Secretary

Mary Ellen Bassett

18150 Fowls Rd..

Middleburg Hts, Oh 44130

Vice President

Jim Karrick

2616 Starling Court

Pleasanton, Ca 94566

Treasurer

Leon Eichenlaub

1904 Highland Dr

Anacortes, Wa 98221

Directors

Sue Statmate

3750 E County 17th

Yuma, Az 85365

Betty LaBrecque

3750 E County 17th

Yuma, Az 85365

Vic Smith

720 Brookside Circle

Rogue River, Or 97537

Al Thibodeau

101 Rainbow Dr #312

Livingston, TX 77351-9300

Tedora Davis

2511 SE River Rd. #73

Hillsboro, Or 97123

Schedule L Balance Sheets		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash .....		3,260		65,671
2a	Trade notes and accounts receivable .....				
b	Less allowance for bad debts .....	( )		( )	
3	Inventories .....				763
4	U.S. government obligations .....				
5	Tax-exempt securities (see instructions) .....				
6	Other current assets (attach sch.) SEE ST. 2.		16,088		
7	Loans to stockholders .....				
8	Mortgage and real estate loans .....				
9	Other investments (attach sch.) .....				
10a	Buildings and other depreciable assets .....				
b	Less accumulated depreciation .....	( )		( )	
11a	Depletable assets .....				
b	Less accumulated depletion .....	( )		( )	
12	Land (net of any amortization) .....		251,928		261,700
13a	Intangible assets (amortizable only) .....				
b	Less accumulated amortization .....	( )		( )	
14	Other assets (attach schedule) SEE ST. 3.		477,911		464,323
15	Total assets .....		749,187		792,457
<b>Liabilities and Stockholders' Equity</b>					
16	Accounts payable .....				
17	Mortgages, notes, bonds payable in less than 1 year .....				
18	Other current liabilities (attach sch.) SEE ST. 4.		37,374		62,908
19	Loans from stockholders .....				
20	Mortgages, notes, bonds payable in 1 year or more .....				
21	Other liabilities (attach sch.) SEE ST. 5.		726,078		727,720
22	Capital stock: a Preferred stock .....				
b	Common stock .....				
23	Paid-in or capital surplus .....				
24	Retained earnings -- Appropriated SEE ST. 6.				1,829
25	Retained earnings -- Unappropriated .....		-14,265		
26	Less cost of treasury stock .....	( )		( )	
27	Total liabilities and stockholders' equity .....		749,187		792,457

Note: You are not required to complete Schedules M-1 and M-2 below if the total assets on line 15, column (d) of schedule L are less than \$25,000.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return (See page 18 of instructions.)	
1	Net income (loss) per books .....
	Income tax .....
	Income over capital gains .....
	Income on books this year .....
7	Income recorded on books this year not included on this return (itemize):
a	Tax-exempt interest \$ .....
8	Deductions on this return not charged against book income this year (itemize):
	Depreciation .....
	Depletion .....
	Charitable contributions .....
	Other .....

The accompanying Arizona Corporation Commission Annual Financial Report was not audited by us and accordingly we do not express an opinion on it. It was prepared on a form prescribed by the Arizona Corporation Commission, and does not include all disclosures required for a fair presentation of the financial position in accordance with generally accepted accounting principles.

SKP KOFA KO-OP RETREAT, INC.

86-0504252

STATEMENT 1  
FORM 1120, LINE 26  
OTHER DEDUCTIONS

BANK CHARGES .....	\$	260
INSURANCE .....		11,576
LEGAL AND PROFESSIONAL .....		4,956
MANAGER'S EXPENSE .....		759
MILEAGE-MEMBERS .....		38
MISCELLANEOUS .....		1,370
OFFICE EXPENSE .....		2,741
REPLACEMENTS .....		5,000
TELEPHONE .....		771
TRASH COLLECTION .....		2,708
TV DESCRAMBLER SERVICE .....		2,183
UTILITIES .....		11,680
TOTAL	\$	44,042
		=====

STATEMENT 2  
FORM 1120, SCHEDULE L, LINE 6  
OTHER CURRENT ASSETS

	BEGINNING	ENDING
	-----	-----
OTHER RECEIVABLES .....	\$ 16,088	\$ 0
TOTAL	\$ 16,088	\$ 0
	=====	=====

STATEMENT 3  
FORM 1120, SCHEDULE L, LINE 14  
OTHER ASSETS

	BEGINNING	ENDING
	-----	-----
ROUNDING .....	\$ 1	\$ 1
BUILDINGS AND EQUIPMENT .....	477,910	464,322
TOTAL	\$ 477,911	\$ 464,323
	=====	=====

SKP KOFA KO-OP RETREAT, INC.

86-0504252

STATEMENT 4  
FORM 1120, SCHEDULE L, LINE 18  
OTHER CURRENT LIABILITIES

	BEGINNING	ENDING
RESTRICTED FUNDS .....	\$ 37,374	\$ 62,817
PAYROLL TAX WITHHELD .....	0	91
TOTAL	\$ 37,374	\$ 62,908

STATEMENT 5  
FORM 1120, SCHEDULE L, LINE 21  
OTHER LIABILITIES

	BEGINNING	ENDING
LEASE ASSESSMENT VALUE .....	\$ 726,078	\$ 727,720
TOTAL	\$ 726,078	\$ 727,720

STATEMENT 6  
FORM 1120, SCHEDULE L, LINE 24  
RETAINED EARNINGS - APPROPRIATED

	BEGINNING	ENDING
RESERVE FOR REPLACEMENTS .....	\$ 0	\$ 1,829
TOTAL	\$ 0	\$ 1,829

STATEMENT 7  
FORM 1120, SCHEDULE M-2, LINE 3  
OTHER INCREASES

PRIOR YEAR'S ADJUSTMENT .....	\$ 14,265
TOTAL	\$ 14,265

**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 X

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 X

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 John Barusch Date 3/9/96 By \_\_\_\_\_ Date \_\_\_\_\_

Title Treasurer Title \_\_\_\_\_

PH