	STATE OF ARIA CORPORATION CO CORPORATION ANNUA & CERTIFICATE OF DI	MMISSIOI Ar AL REPOR	izona Corporation Commission
DUE ON OR BEFORE 04,	/29/1999	·	ING FEE \$10.00
Statutes, Title 10. The Commiss SUBMITTED ON THIS ORIGINA	uired by A.R.S. §10-1622 & §10-11622 for sion's authority to prescribe this form is A LFORM. Make changes or corrections wi pration. See instructions for proper forma	R.S. §10-121.A. & §10-312 here necessary. Informati	21.A. YOUR REPORT MUST BE on for the report should reflect
1. NEW LIFE OUT 4900 N WAGON	REACH MINISTRIES, INC.		RECEIVED
	LEY, AZ 86314		APR 2 9 1999
			ARIZONA CORP. COMMISSION CORPORATIONS DIVISION
Business Phone:	772-9802 Corporation File N		-0161821-3
State of Domicile:	An agree to a state and the state of the sta	on: NON-PROFIT	· · ·
2. Arizona Statutor	• •	change a	daurs 19 RiFIE 2 on hack of page
-	Address: <u>3415</u> ETHERIDGE LN	5260 LON	sg Rifle
	ate, Zip: PRESCOTT VALLEY	AZ 86312-	s on mainly page
ACC USE ONLY	Use this box only :	-	new Statutory Agent
Fee \$ <u>∠</u> Perially \$ Reinstate <mark>RALD</mark> Expedite \$ Total \$	If appointing a <u>new</u> statutory agent, t below: I, (individual) or We, (corporation or Statutory Agent, do hereby consent to law.	limited liability company)	
FY98-99	Signature of <i>new</i>	Statutory Agent	
	below which best describes the CHARA	CTER OF BUSINESS of	your corporation.
<u>BUSINESS COF</u> 1. Accounting	PORATIONS 20. Manufacturing	NON-PROFIT COR	PORATIONS
2. Advertising	21. Mining	1. <u> </u>	
3. Aerospace 4. Agriculture	22. News Media 23. Pharmaceutical	3. <u>Educational</u>	I
5. Architecture	23. Pharmaceutical 24. Publishing/Printing	4 Civic 5. Political	
6. Banking/Finance	25. Ranching/Livestock	6. 🔀 Religious	
7. Barbers/Cosmetology 8. Construction	26. Real Estate 27. Restaurant/Bar	7. <u>    Social</u> 8. <u>    Literary</u>	
9. Contractor	28. Retail Sales	9. <u>Cuttural</u>	
10. Credit/Collection 11. Education	29. Science/Research 30. Sports/Sporting Events	10. <u>Athletic</u>	
12. Engineering	31. Technology(Computers)	11. <u>    Science/Rea</u> 12. <u>    Hospital/Hea</u>	
13. Entertainment	32. Technology(General)	13 Agricultural	
14. General Consulting 15. Health Care	33. Television/Radio 34. Tourism/Convention Services	14 Animal Husl	
16. Hotel/Motel	35. Transportation	15 Homeowner 16 Professiona	
17. Import/Export 18. Insurance	36. Utilities 37. Veterinary Medicine/Animal Care	industrial	or trade association
19. Legal Services	37. Veletinary Medicine/Animal Care 38. Other	17 Other	

Number of S	hares/Certificates Authorized	Class	Series Within Class (if any)
		Class	Series Within Class (if any)
Number of S			
6. <u>SHAREH</u>	DLDERS: (Business Corporations and Busi	iness Trusts are <u>REQU</u>	RED to complete this section.)
List shareho beneficial int	Iders holding more than 20% of any class of erest in the corporation.	of shares issued by the	corporation, or having more than a 20%
· ·	Name:	Name:	
	Name:	Name:	
7. <u>officer</u>	S (If no changes since last report, check	k here <u>and go on to</u>	Section 8.)
Name:	KENNETH E OSBORNE	Name:	
Title:	PRESIDENT/CEO	Tītle:	
Address:	5260 LONG RIFLE	Address:	- 
	PRESCOTT VALLEY, AZ 86312-	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Date taking	office: 06-01-86	Date taking	office:
Name:	ANTHONY M PACINI	Name:	1
 Title:	SECRETARY	<b>Title</b> :	· · · ·
Address:	7880 E LAS FLORES	Address:	
	PRESCOTT VALLEY, AZ 86312-	<u> </u>	·
Date taking	office: 01-01-90	Date taking	office:
			_ ·
8. <u>DIRECTO</u>	DRS (If no changes since last report, ch	eck here <u>and</u> go on	
Name:	ANTHONY M PACINI	Name:	JUNE K OSBORNE
Address: _	7880 E LAS FLORES		5260 LONG RIFLE
	PRESCOTT VALLEY, AZ 86312-		PRESCOTT VALLEY, AZ 86312
Date taking	01-01-90 office:	Date taking	01-01-97 office:
Name:	KENNETH E OSBORNE	Name:	
Address:	5260 LONG RIFLE		
	PRESCOTT VALLEY, AZ 86312-		

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#### TREASURER'S REPORT

### NEW LIFE OUTREACH MINISTRIES, INC.

1998

#### INCOME

Your Treasurer is chargeable as follows: Beginning Balance - January 1, 1998......\$ 8,444.46 Contributions Received......\$ 71.064.26 Total Charge \$ 79.508/72 COMPENSATION OF OFFICERS Kenneth E. Osborne - - Pastor.....\$ 53,250.00 Administration Expenses: Your Treasurer is entitled to the following credits: <u>Administrative Expenses:</u> Arizona Corporation Commision - - Annual Report \$ 10.00 <u>Contributions and Financial Aid to Members:</u> Tony Pacini ......\$ 300.00

110.00

100.00

Danny Sinacori.....\$

Shirley Schmidt.....\$

Continued Equipment / Furnishing / Supplies

Rose Creek Products\$ Church Copyright License\$ U. S. Postmaster\$ Seitz Office City\$ Roadrunner/B&B fire Ext\$	105.00 88.00 64.00 48.92 18.00
Deluxe Checks\$	41.75
Insurance:	
Travelers Property Casualty\$	690.00
Utilities:	
U.S. West/ Airtouch Cellular\$ APS (Arizona Public Service)\$ Town Of Prescott Valley sewer dept\$ Shamrock Water Co\$ Flame Propane\$	1055.47 759.31 482.01 108.31 490.20

Total Credits.....\$ 11,415.61

# RECAPITULATION

Beginning Balance as of 01/01/98\$	8,444.46
Income Received\$	71,064.26
Compensation of Offecers\$	53,250.00
Expenses Incurred\$	11,415.61
Leaving a Balance on hand as of 12-31-98\$	14,843.11
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Please Exter Corporation Name: NEW LIFE Outreach Ministeies INC, Page	Please Enter Corporation Name:	NEW LIFE	Outreach	Ministries	INC.	Page 3
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#### 9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)

Only nonprofit corporations must <u>attach</u> a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corporations Only.

This corporation (	loes	X	does	not		have members.
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YES 🗖

## 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:



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. 4.	Present home address. Prior addresses (for immediate preceding 7 year period).	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.

## 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 <u>must</u> be marked:	YES 🗆			
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: Annual Reports must be signed by a duly authorized officer. 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 KENNETH E. OSLORNE ate 4-26-	Aname	Date
Signature	Signature	
Title <u>Resident</u> CEO	Title	

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