



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

Arizona Corporation Commission



DUE ON OR BEFORE 04/30/2000

FY99-00

FILING FEE \$10.00

The following information is required by A.R.S. §10-1622 & §10-11622 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. & §10-3121.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.**

-0252288-9

1. GREER COMMUNITY FACILITIES ASSOCIATION
% CLYDE W KURTZ
PO BOX 45
GREER, AZ 85927

Business Phone: _____

(Business phone is optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

RECEIVED

APR 10 2000

2. Arizona Statutory Agent: SAM P APPLEWHITE III
Street Address: 101 N 1ST AVE #2700
(NOT P.O. BOX)
City, State, Zip: PHOENIX AZ 85003-

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ 10.00

Penalty \$

Renewal \$

Expedite \$

Resubmit \$

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

- | | |
|---|--|
| <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 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 checked="" 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. (If no changes since last report, check here and go on to Section 6.)

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: CLYDE W KURTZ
Title: PRESIDENT/CEO

Address: P O BOX 45
GREER, AZ 85927-

Date taking office: 07/11/1993

Name: CHARLES BUST
Title: SECRETARY

Address: P O BOX 143
GREER, AZ 85927-

Date taking office: 05/30/1996

Name: NEIL CLEMENTS
Title: VICE-PRESIDENT

Address: 3151 N PANTANO
TUCSON, AZ 85720-

Date taking office: 05/30/1995

Name: SUE JACOBS
Title: TREASURER

Address: P O BOX 134
GREER, AZ 85927-

Date taking office: 07/11/1993

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

Name: DALLAS HOLLY
Address: P O BOX 146

GREER, AZ 85927-

Date taking office: 12/05/1997

Name: FRANK SVANCARA
Address: 9749 E SANDS DR

SCOTTSDALE, AZ 85255-

Date taking office: 09/11/1997

Name: HAROLD WATSON
Address: 7598 E BAJADA

SCOTTSDALE, AZ 85255-

Date taking office: 07/11/1995

Name: FRED EMERSON
Address: 4011 E SAN JUAN AVE

PHOENIX, AZ 85018-

Date taking office: 07/01/1996

GREER COMMUNITY FACILITIES ASSOCIATION
0252288-9

PRESIDENT - CLYDE W. KURTZ
P.O. BOX 45
GREER, AZ 85927
Since 7/11/93

VICE PRESIDENT - NEIL CLEMENTS
3151 N. PANTANO
TUCSON, AZ 85720
Since 5/30/95

SECRETARY - FRED EMERSON
4011 E. SAN JUAN AVE.
PHOENIX, AZ 85018
Since 6/12/99

TREASURER - LADELIA MUSANTE
RT 1 BOX 990
LAKESIDE, AZ 85929
Since 6/12/99

DIRECTORS - BRUCE GABBY
P.O. BOX 314
GREER, AZ 85927
Since 1/8/00

SUE JACOBS
3679 DEEP FOREST DRIVE
PINETOP, AZ 85935
Since 7/11/93

JOHN NIELSON
8765 W. CUTTER DRIVE
PEORIA, AZ 85381
Since 5/30/95

JANET PEGNAM
P.O. BOX 316
GREER, AZ 85927
Since 7/10/99

GREER COMMUNITY FACILITIES
GCFA Balance Sheet
As of 12-31-99

Page 1

Assets

Current Assets

NATL BANK CKING ACCOUNT	\$	35,420.89
NATL BANK CD ACCT 0002500746		41,970.11
NATL BANK CD ACCT 0002500826		41,260.04
NATL BANK CD ACCT 0002500906		41,118.10

Total Current Assets		\$	159,769.14
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Fixed Assets

8 RIPARIAN ACRES	410,000.00
WATER RIGHTS	50,000.00
2.2 COMMERCIAL ACRES	54,600.00
COMMUNITY CENTER SITE	175,000.00

Total Fixed Assets	\$	689,600.00
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Pledges

ANONYMOUS DONAR PLEDGE	250,000.00
GENERAL PLEDGES	14,524.00

Total Pledges	\$	264,524.00
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Total Assets	\$	1,113,893.14
		=====

Liabilities and Equity

Liabilities

Current Liabilities

ARCHITECT CONTRACT	16,072.00
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Total Current Liabilities		16,072.00
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Association Equity

EQUITY	938,052.00
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Total Stockholders Equity	\$	938,052.00
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Total Liabilities and Equity	\$	1,113,893.14
		=====

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)

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.

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

This corporation **does** ☐ **does not** ☒ have members.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)

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: [Underlined portion pertains to profit corporations only]

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 & 10-3202.02)

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? [Underlined portion pertains to profit corporations only]

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: 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 <u>LaDelta Musante</u>	Date <u>4/4/00</u>	Name <u>Clyde Kurtz MD</u>	Date <u>4/4/00</u>
Signature <u>LaDelta Musante</u>		Signature <u>CLYDE KURTZ MD</u>	
Title <u>Treasurer</u>		Title <u>Pres</u>	

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