

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



DUE ON OR BEFORE 11/01/2000

FY00-01

FILING FEE \$45.00

The following information is required by A.R.S. §10-1622 & §10-11622 for all corporations organized pursuant to Arizona Revised The Commission's authority to prescribe this form is A.R.S. §10-121.A. & §10-3121.A. Statutes, Title 10. 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.

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Business Phone:	1.	G.B. DAVIDSON IN	NVESTMENT GROUP, INC.	•	RECEIVED
Business Phone: State of Domicile: ARTZONA Type of Corporation: PROFIT Arizona Statutory Agent: FC SERVICE CORPORATION Street Address: 3003 N CENTRAL AVE #2600 (NOT P.O. BOX) City, State, Zip: PHORNIX AZ 85012-2913 Use this box only if appointing a new statutory Agent appointing a new statutory agent the new agent MUST consent to that appointment by signage below. Penalty \$ Reanstate \$ Resulted \$ Rosubmit \$ Signature of new Statutory Agent to this appointment until my removal or resignation business comporations are (chierage Corporations are (chierage Corporations) are (chierage Corporations) are (chiera		3567 E SUNRISE	#219		SEP 1 8 2000
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ACC USE ONLY Fee \$			Use this box only	if appointing a new Stat	utory Agent
Resubmit \$ Signature of new Statutory Agent Secondary Address: (Foreign Corporations are REQUIRED to complete this section.) Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation. BUSINESS CORPORATIONS 1. Accounting 20. Manufacturing NON-PROFIT CORPORATIONS 2. Advertising 21. Mining 1. Charitable 3. Aerospace 22. News Media 2. Benevolent 4. Agriculture 23. Pharmaceutical 2. Benevolent 5. Architecture 24. Publishing/Printing 3. Educational 5. Architecture 24. Publishing/Printing 4. Civic 6. Banking/Finance 25. Ranching/Livestock 5. Political 8. Construction 27. Restaurant/Bar 7. Social 9. Contractor 28. Retail Sales 8. Literary 10. Credit/Collection 29. Science/Research 9. Cultural 11. Education 30. Sports/Sporting Events 10. Athletic 12. Engineering 31. Technology(Computers) 11. Science/Research 12. Engineering 31. Technology(Computers) 11. Science/Research 12. Hospital/Health Care 13. Transportation 15. Homeowner's Association 15. Homeowner's Association 16. Integration 36. Utilities 16. Insurance 37. Veterinary Medicine/Animal Care 19. Legal Services 30. Other MUSSTMEMTS 1/M. 10. Other			appointing a <u>new</u> statutory a igning below.	gent, the new agent MUST consent to th	at appointment by
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Number of Shares/Certificates Issued Class	Series Within Class (if any)
251,555 Com	NON
6. SHAREHOLDERS: (Business Corporations and Business T List shareholders holding more than 20% of any class of share beneficial interest in the corporation. Please Type or I	es issued by the corporation, or having more than a 20%. Print Clearly.
Name: <u>DAVIO MEHL</u>	Name:
NONE	Name:
7. OFFICERS Please Type or Print Clearly.	
Name: GARY B DAVIDSON	Name:
Title: PRESIDENT / CEO	Title:
Address: 3567 E. SUNRISE # 219	_
TUCSON, AZ 85718	, idd, oco.
Date taking office: _02-0/-89	Date taking office:
Name: JUDITH DAVIDSON	Name:
Title: SECRETARY	Title:
Address: 3567 E. SUNRISE #219	Address:
TUCSON, AZ 85718	
Date taking office: 02-01-89	Date taking office:
8. DIRECTORS Please Type or Print Clearly.	
Name: GARY B DAVIDSON	
Address: 3567 E. SUNRISE # 219	
TUCSON, AZ 85718	
Date taking office: 02-01-89	Date taking office:
Name:	
	Address:
Address:	
Address:	

Г	lease Effer Corporation Name: 6, 6, DAVIDSON	INV	ESTMENT GROWP,	INC.	Page 3						
9.	FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10	-1162	2 / 0)								
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CC	rporations are exempt from filing a financial disclosure.		3 , 11	o and oquity).	A COLOR TOTALS OF						
9/	MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corpo	ration	c Only								
	This corporation does does not have members.										
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10	. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.	A Q 9.	10 11600 A 7\								
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3.	The state of the second of the	i oraer	'OT 20V State Of tederal court and	arad within the c							
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	(a) fraud or registration provisions of the securities laws	of tha	t jurisdiction, or								
	(b) the consumer fraud laws of that jurisdiction, or (c) the antitrust or restraint of trade laws of that jurisdict		—								
	*		NO T								
	One box must be marked: YES		NO Ø								
if "	YES", the following information must be submitted as an attachmer	nt to this	S report for each person subject to	One or more of t	ho cations stated						
in l	tems 1. through 3. above.		o oportion additipated it subject to	one of more of t	ne actions stated						
1.	Full name and prior names used. 5.		Date and location of birth.								
2.	Full birth name.		Social Security Number								
3. 4.			The nature and description of eac	h conviction or j	udicial action; the						
	preceding 7 year period).		date and location; the court and p or cause number of the case.	ublic agency inv	olved, and the file						
			or o	•							
11.	STATEMENT OF BANKRUPTCY (A.R.S. §§10-202.D.	2 2. 1/	0 2202 02								
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reve	poration served in such capacity or held a 20% interest in ar ocation of the other corporation? [Underlined portion pertain	is to p	er corporation during the bankr Profit corporations only	uptcy, receive	ship, or charter						
	One box must be marked: YES		NO Ø								
	Chapter Date Filed	(Case Number								
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				son subject to t	he statement above.						
a) ii	ficorporated b) transacted business. 3) The dates of corporate	opera	tion.	···ioi·· caci· coip	Claudi was						
12.	SIGNATURES				,						
	CAUTION: Annual Reports must be signed by a du	y autl	orized officer. Annual Repo	rts submitted	with incorrect						
•	signatures will be rejected.				ecce accessor accessors and expression						
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4141,	ZONA REVISED STATUTES HAVE BEEN FILED WITH THE	ARIZO	NA DEPARTMENT OF REVEN	IUE.	40 OF THE						
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16	(Signator(s) must be duly authorized corpora	Title	icarle) listed in section 7 -44	bla as	-						
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