



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



DUE ON OR BEFORE 11/01/2000

FY00-01

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.**

-0852100-7

1. **LIONS CLUB OF GLOBE, AZ., INC.**
PO BOX 209
GLOBE, AZ 85502

Business Phone: _____ (Business phone is optional.)
State of Domicile: **ARIZONA** Type of Corporation: **NON-PROFIT**

RECEIVED

OCT - 6 2000

2. Arizona Statutory Agent: **COULTER G ANDERSON**
Street Address: **#4 SILVER HILL**
(NOT P.O. BOX) **PO BOX 171**
City, State, Zip: **GLOBE AZ 85502-**

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

Use this box only if appointing a new Statutory Agent

ACC USE ONLY	IPR
Fee \$	<u>10 10.00</u>
Penalty \$	_____
Reinstate \$	_____
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: **150965**
(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 |
| <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 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.

Number of Shares/Certificates Authorized

Class

Series Within Class (if any)

NA

Number of Shares/Certificates Issued

Class

Series Within Class (if any)

NA**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. **Please Type or Print Clearly.**

Name: NA.

Name: _____

NONE ☒

Name: _____

Name: _____

7. OFFICERS**Please Type or Print Clearly.**Name: ALICIA FLANAGANName: DONNA ANDERSONTitle: PRESIDENTTitle: SECRETARYAddress: 7785 S. HOPI DR.Address: P.O. BOX 171GLOBE, AZ 85501GLOBE, AZ 85502Date taking office: 7-1-2000Date taking office: 7/1/2000Name: CONNIE TEAGUEName: SHIRLEY LILESTitle: 1st VICE-PRESIDENTTitle: TREASURERAddress: P.O. BOX 1281Address: 419 E. OAK STGLOBE, AZ 85502GLOBE, AZ 85501Date taking office: 7/1/2000Date taking office: 7/1/2000**8. DIRECTORS****Please Type or Print Clearly.**

Name: _____

Name: _____

Address: SEE LIST

Address: _____

Date taking office: _____

Date taking office: _____

Name: _____

Name: _____

Address: _____

Address: _____

Date taking office: _____

Date taking office: _____

Lions Club of Globe, Az., Inc.
Board of Directors

Guy Anderson
P. O. Box 171
Globe, Az. 85502

Louis Ellsworth Jr.
P. O. Box 49
Globe, Az. 85502

J. R. Malott
P. O. Box 351
Globe, Az. 85502

Robin Raney
51500 N. Signal Mt. Rd.
Miami, Az. 85539

Sherry Rice
741 South St.
Globe, Az. 85501

Ed Bacon
290 N. Broad St.
Globe, Az. 85501

Thelma Gutierrez
1118 Granite St.
Miami, Az. 85539

Carley Moore
P. O. Box 350
Globe, Az. 85502

Sherry Rice
741 South St.
Globe, Az. 85501

Ernie Soto
P. O. Box 51
Globe, Az. 85502

GLOBE LIONS CLUB
Financial Report September 1-31, 2000

Service Account

Balance as of September 1, 2000 4,604.45

Income

Mints	50.00	
Beer Booth	3,461.50	(300.00 used for Catering change)
Catering	100.00	
Donation to C.T.	8.00	
Leaderdog	33.94	
Bank Chg. Returned	10.00	
Check Chg. Returned	<u>45.00</u>	<u>3,708.44</u>

Expenses:

Glasses	1,302.00	
Beer Booth Bev.	162.60	
Beer Booth Liq. Lic.	200.00	
Hist. Globe 25%	489.30	
Marcanti Catering	357.00	
Casillas Catering	158.47	
Hist. Globe Liq. Lic	100.00	(4)
Bank Check Chg.	55.00	
Liquor Insurance	<u>981.83</u>	<u>3,806.20</u>

Balance as of September 31, 2000 4,506.69

Administration Account

Balance as of September 1, 2000 2,605.44

Income

Dues	133.00	
Meals	280.00	
Fines & Raffles	174.00	
Lions Items Purch	13.95	
Newsletter Ads	75.00	
Bank Fee Return	<u>10.00</u>	<u>685.95</u>

Expenses

Meals	351.90	
Int. Dues	37.00	
Lions Supplies	37.75	
Bond for Treasurer	<u>100.00</u>	<u>526.65</u>

Balance as of September 31, 2000 2,764.74

Respectfully Submitted by Shirley Liles, Treasurer

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 ☒

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 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>ALICIA FLANAGAN</u>	Date <u>10/5/2000</u>	Name <u>DONNA L. ANDERSON</u>	Date <u>10/5/2000</u>
Signature <u>Alicia L. Flanagan</u>		Signature <u>Donna L. Anderson</u>	
Title <u>PRESIDENT</u>		Title <u>Secretary</u>	

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