



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

Arizona Corporation Commission



00277381

DUE ON OR BEFORE 03/25/2001

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.

-0162421-6

1. CHRISTOPHER CREEK COMMUNITY BIBLE FELLOW
104 W TIMBER CIR
PAYSON, AZ 85541

RECEIVED

MAR 14 2001

ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION

Business Phone: _____ (Business phone is optional.)

State of Domicile: **ARIZONA**

Type of Corporation: **NON-PROFIT**

2. Arizona Statutory Agent: **G OLIN ADAMS**
Street Address: **104 W TIMBER CIR**
(NOT P.O. BOX)
City, State, Zip: **PAYSON AZ 85541-**

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ 10 3/15/01

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:

(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 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.

-0162421-6

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.

Please Type or Print Clearly.

☒ NONE ☐ Name: _____ Name: _____

Name: _____ Name: _____

7. OFFICERS Please Type or Print Clearly.Name: G.. OLIN ADAMS

Name: _____

Title: PRES. / CEO

Title: _____

Address: 105 104 W. TIMBER CIRCLE

Address: _____

PAYSON, ARIZ.. 85541Date taking office: 12/01/1994

Date taking office: _____

Name: RONALD BINGAMAN

Name: _____

Title: SEC'Y AND TREASURER

Title: _____

Address: 518 OVERLAND WAY

Address: _____

PAYSON, ARIZ.. 85541Date taking office: 12/01/98

Date taking office: _____

8. DIRECTORS Please Type or Print Clearly.Name: ROBERT JONESName: RICHARD SIMMONSAddress: Box 144Address: 1401 E. Granite DellsCHRISTOPHER CREEK, PAYSON, AZPAYSON, AZ. 85541Date taking office: 12/01/98Date taking office: 12/01/99Name: TRACY HURTEEName: RALPH BRYANAddress: HCR 162 A CHRISTOPHER CREEKAddress: 4013 W. SOLANDO DR. S.PAYSON, AZ. 85541PHX.. AZ.. 85019Date taking office: 12/01/98Date taking office: 12/01/99

CHRISTOPHER CREEK COMMUNITY BIBLE FELLOWSHIP
YEAR END FISCAL REPORT 12-1-1999 THRU 11-31-2000

Beginning Balance 12-1-99			
Checking Account		\$ 3383.79	
Savings (Money Market)		<u>12384.40</u>	
Total Beginning Balance			\$15768.19
Expenditures for Outreach			
Missions			
American Missionary Fellowship	\$ 600.00		
Western Indian Ministries	1200.00		
Payson Comm. Christian School	<u>1100.00</u>		
Total Missions Outreach		2900.00	
Special Gifts			
Gifts to Individuals	3025.00		
Scholarships (camp)	<u>280.00</u>		
Total Special Gifts		3305.00	
Other Expenditures			
Capital Assets	988.50		
Total Others Expenditures		988.50	
Ministerial Expenses			
Ministry Compensation & Car Allow.	18000.00		
Ministry Assistance	2600.00		
Guest Speakers	175.00		
Music Ministry	360.00		
General Office Supplies	1139.62		
Sunday School	313.69		
AWANA Program	1129.07		
Moody Magazine	<u>40.00</u>		
Total Ministerial Expenses		23757.38	
Utilities			
Telephone Service	703.55		
Gas (propane)	1116.34		
Electric Service	<u>1140.00</u>		
Total Utilities		2959.89	
Maintenance Expenses			
Janitorial Compensation	900.00		
Janitorial Supplies	113.60		
Building & Grounds Expenses	<u>926.00</u>		
Total Maintenance Expenses		1939.60	
Miscellaneous Expenses			
Insurance	781.00		
Youth - LA/DC Conference	2400.55		
Other Miscellaneous	<u>126.83</u>		
Total Miscellaneous		<u>3308.38</u>	
Total All Above Expenses			(39158.75)

YEAR END FISCAL REPORT 12-1-1999 THRU 11-30-2000

-0162421-6

Income		
Contributions	\$38369.80	
Interest Earned - Money Market	<u>596.86</u>	
Total Income Received		<u>\$38966.66</u>
Ending Balance as of 11-30-2000		<u>\$15576.10</u>
BALANCES OF ACCOUNTS as of 11-30-2000		
Checking Account	5233.84	
Savings (Money Market - Edward Jones)	<u>10342.26</u>	
Total Cash Available		<u>\$15576.10</u>

Thank you all for faithfully supporting the Lord's work.


Ron Bingamon
Treasurer

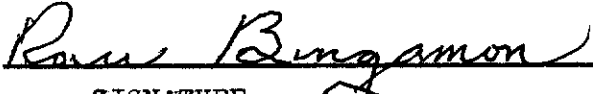
NAME

RONALD BINGAMAN

TITLE

TREASURER

DATE 3/10/20001


SIGNATURE

✓
CHRISTOPHER CREEK COMMUNITY BIBLE FELLOWSHIP

BALANCE SHEET

FISCAL YEAR END 11/31/ 2000

ASSETS

PROPERTY AND LAND

CHAPEL AND SUNDAY SCHOOL BUILDINGS

(TOTAL INITIAL COST , LAND AND BUILDINGS) W TOUT DEPRECIATION- \$1130,000.00

(ESTIMATED VALUE DUE TO INFLATION OF LAND ETC.

IS NOW ESTIMATED AT ----- \$250,000)

CASH ON HAND

(CHECKING AND EMERGENCY FUND) -----15,576.00

TOTAL ASSETS ----- 145,576.00

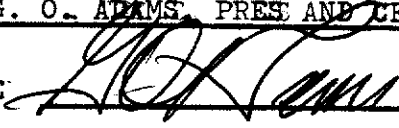
ACCOUNTS RECEIVABLES- - - - - NONE

ACCOUNTS PAYABLES - - - - - NONE

NET WORTH - - - - - 145,576.00

NAME G. O. ADAMS, PRES AND CEO

SIGNATURE



DATE

3/10/2001

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

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 G. OLIN ADAMS, PRES. Date 3/10/20 Name _____ Date _____

Signature [Signature] Signature _____

Title [Signature] Title _____

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