	STATE OF ARIZONA CORPORATION COMMISSION CORPORATION ANNUAL REPORT & CERTIFICATE OF DISCLOSURE	Arizona Corporation Commission
Statutes, Title 10. YOUH REPORT MUST for the report should INSTRUCTIONS ON P	tion is required by A.R.S. §10-1622 & §10-11622 for all corporations of The Commission's authority to prescribe this form is BE SUBMITTED ON THIS DRIGINAL FORM. Make changes or correct reflect the current status of the corporation. See instructions AGE 4.	antione where necessary, importation
-0119497- 1. THE ARC OF PO BOX 443 TUCSON, AZ	TUCSON, INC.	MAR 0 9 2001 ARIZONA CORP. COMMISSION CORPORATIONS DIVISION
Business	Phone: (Business phone is optional.) omicile: <b>ARIZONA</b> Type of Corporation: <b>NON-PROF</b>	RECEIVED
	Statutory Agent:       GREGORY J HAVER         Street Address:       4690 N CAMTNO GACELA       6601         (NOT P.O. BOX)       NZ 857         City, State, Zip:       TUCSON       NZ 857         Use this box only if appointing a new statutory agent, the new agent MUS         PR       Notice the statutory agent, the new agent MUS         If appointing a new statutory agent, the new agent MUS         If individual) or We, (corporation or limited liability compares statutory Agent, do hereby consent to this appointment	new Statutory Agent Consent to that appointment by
Reinstate \$	Signature of new Statutory Agent	
4. Check the O BI 1. Accoun 2. Adventis 3. Aerosp. 4. Agricul 5. Archite 6. Bankin 7. Barber 8. Constri	In a complete       Image: Complete         Isiness complete       Image: Complete         Ing       20. Manulacturing         Ing       21. Mining         Ing       21. Mining         Ing       22. News Media         Ing       23. Pharmaceutical         Ure       23. Pharmaceutical         Ure       24. Publishing/Printing         Ure       25. Ranching/Livestock         Vision       27. Restaurant/Bar         Momentum       28. Retail Sales	JSINESS of your corporation. <u>PROFIT CORPORATIONS</u> Charitable Benevolent Educational Civic Political Religious Social Literary Cultural Abileto
11. Educa 12. Engine 13. Entert	Collection29.     Science/Research     10	Arhetic Science/Research Hospital/Health Care Agricultural Animal Husbandry Homeowner's Association Professional, commercial Industrial or trade association Other

Business trusts must indicate the number of transfer the trust estate. $-0(9497-7)$	· -·· <b>·</b> •,	
Number of Shares/Certificates Authorized	Class	Series Within Class (if any)
NA		
Number of Shares/Certificates Issued	Class	Series Within Class (if any)
6. <u>SHAREHOLDERS</u> : (Business Corporations and Bu List shareholders holding more than 20% of any class beneficial interest in the corporation. Please Name:	Type or Print Clea	e corporation, or having more than a 20%
Name:	Name:	
• OFFICERS Please Type or Print Clearly.		
ame: <u>Harry Patton</u>	Name:	Kelly McLear
itle: <u>President</u>		Sectedary
ddress: <u>4554 E La Estancia</u>	Address:	601 N Skytzav
The son, AZ 85718		Tic son, AZ 85718
ate taking office: <u>May 7,2000</u>		office:
ame: <u>Martha Brightwell</u>		Pat Gumm
tle: <u>Vice President</u>		Treasurer
ddress: 2200 N. Campbell Ave		475 W Sweetwater Rd
Tuc son, AZ 85719		1c son, AZ_85745
ate taking office: May 7, 2000		fice: May 7, 2000
DIRECTORS Please Type or Print Clearly.	-	
me: Gail Fiorini	Name:Lyr	me Oland
dress: <u>11400 E Catalina Rwy</u>	Address: _29]	15 E 2nd St
Tuc son, AZ 85749		son, AZ 85716
te taking office: May 7, 2000	Date taking of	lice: <u>May</u> 7, 2000
me: Wendy Sokol	Name: Reb	ecca McCauley
tress: 3673 E Baker	Address:842	1 E.Rolling Ridge
Ticson, AZ 85716	Tuc	son, AZ 85710
e taking office: <u>May 7, 2000</u>		

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	CASE BALLNICE LLAST YEAR	ENDING CASH DALANCE	Total disburshims	Board Retreat RISCELLANECRYS SAUX CHARGEDEENTS SAUX CHARGES	MENDEGASELY AND VARIANT AND VALUE AND VA VALUE AND VALUE	Transition Fair Leggelative forum Frinced Materials Best Fractices	PUBLIC EDUCATION AND AMARSNESS Scholarabips Dreamost chers	POSTACE SUPPLIES Postace and dox revial	NEXHSERVENTE DUES (OTNER) ARCHET	DISEURSERED DOWNTIONS NEW DOWNTIONS NEW DOWNTIONS	TOTAL RECEIPTS	UNUTSICALED	Gift wrap Sales Cost of goods sold	RELEASURS SHERY'S HENGERSHIE DUES FURENAISING	other Interation	Caccioppo Foundarion Occise County United Way Cochise County	DONATIONS Restricted Unrestricted Members	RECEIPTS	9	The Ace of Tucoon Transfer's Report
	13, 264, 17	19,100.57	235.00				115.00		15.00	00,201	795.88		35.00 (28.00)	340,00	12.56		253.32 177.00		18, <del>6</del> 27.69	January-00
· · · <u>-</u> · · · · · · · · · · · · ·	16, 421, 60	22, 685, 79	107,50						15-00 15-00	77 50	3, 604 - 72		3, 337;, 25	136.00	19.47	=	113.00		19,188.57	Februa iy- 00
	13, 796, 33	20,447.83	2, 606.09			15.00		40.58	15.00	2, 535.50	368,12			213,50	24.62		90.00 10.00		22, 685.79	March-00
	15,241,92	21,332.15	858.50		32.40 234.87			227.17	15.00	. 30.00 167.50	1,742.82			375.00	19.82		95.00		20, 447.83	April-00
	16, 682. 62	21,650.35	900.28	60,00	190,28 300,00			200.00	15.00	70.00 65.00	1,218.48			160.00	19.92	968,56	70.00		21, 332.15	wy-ou
	18,100,22	21,862.17	373.08				358.08		15.00		581.90			145.00	231.37	20.81 152.72	00, <b>5</b> E		21,650.35 2	June- 00
	10, 352. 43	22,769.14	255.30		5140.30			100.00	15.00		1,162.27			110.00	27.27		200.00 825.00		21,862.17	J114-00
	10,257.0M	22,340.36	289,95			41.95			175.00	70.00	(138.84)	-	(560.00)	195.00	28,6E	172.34	20-09	•	22,769.14	⊼uqust=90 ¥
	74, 377, <b>4</b> 4	22, 398, 26	995.88		192.52 288.43 120.00	10.00		230.98	15.00 58.19	80.00	1,053.79		875.00	150.00	8.79		20.00		22, 340.35	
	10,000	22, 933.02	347.00		200.00	100.00		32.00	15.00		9£ <b>~\$</b> \$8		1,100.00 (560.00)	80.00	3.73	258.57			22, 398-26	August-00 Messesser-00 November-00 December-00
		23,833,94 18,395,20	507.63		101.85	28,89 100,00		66°68	15.00	172.50	1,067.92		\$20.00 \$535.00		5.42	7.50			22, 933. 52	lovenber-00 i
			606.50	75.54		100.00		100.90	00.CI	00-51E	847.22		1,140.00 [1,008.00]		20# 00	147.72 7.50	265.00		23, 493.91	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
			4.571.94	90,00 75.54	625-15 140-30	73,84 200,00 200,00	115-00	210.00	139,75	160.00 3,588.00 15.00	12,654.64		3,670,00 (2,156,00)	3, 337, 25	1,254.00	968.56 731.35 15.00	1,035.00 825.00 29.81	343,32		YTD 2000

Please Enter Corporation Name:	Arc of Tucson, In	e012692	Page 3
9. FINANCIAL DISCLOSURE (A.R.S. § Nonprofit corporations <u>must attach</u> a financi corporations are exempt from filling a financi	cial statement (balance sn al disclosure.	2.A.9) eet including assets, liabilities and equity).	,
9A. MEMBERS (A.R.S. § 10-11622.A.6	) Nonprofit Corporations	s Only :	
This corporation <b>does</b> 🕅			
10% of the issued and outstanding common shi [Underlined portion pertains to profit cor	ppointment as an officer, une ares or 10% of any other pro porations only]	prietary, beneficial or membership interest in th	
<ol> <li>period immediately preceding the execution</li> <li>Convicted of a felony, the essential elements</li> <li>Monopoly in any state or federal jurisdia</li> <li>Or are subject to an injunction, judgmention</li> <li>immediately preceding execution of this</li> </ol>	ntion of this certificate? Ints of which consisted of frau ction within the seven year t, decree or permanent orde s certificate where such inju	aud or antitrust in any state or federal jurisdiction of, misrepresentation, theft by false prefenses or period immediately preceding execution of the of any state or federal court entered within the unction, judgment, decree or permanent orde	rrestraint of trade or his certificate? e seven year period
<ul> <li>(a) fraud or registration provisions</li> <li>(b) the consumer fraud laws of that</li> <li>(c) the antitrust or restraint of trade</li> </ul>	t jurisdiction, or	at jurisdiction, or	
One pox must be marked	YES 🗆		
If "YES", the following information must be su in Items 1. through 3. above.	Ibmitted as an attachment to	o this report for each person subject to one or more	e of the actions stated
<ol> <li>Full name and prior names used.</li> <li>Full birth name.</li> </ol>	5. 6.	Date and location of birth. Social Security Number The nature and description of each conviction	or ludicial action; the
<ol> <li>Present home address.</li> <li>Prior addresses (for immediate preceding 7 year period).</li> </ol>	7 <b>.</b>	date and location; the court and public agency or cause number of the case.	involved, and the file
11. <u>STATEMENT OF BANKRUPTCY</u> Has ANY person serving either by election more than 20% of the issued and outstandi porporation served in such capacity or he revocation of the other corporation? [Under	or appointment as an onicit ing common shares or 20%	6 of any other proprietary, beneficial or memb other corporation during the bankruptcy, rec	controlling or holding ership interest in the eivership, or charter
One pox must be marked.	YES 🗖	NO 🕅	
Chapter	Date Filed	Case Number	
<ul> <li>YES", the following information mut</li> <li>The names and addresses of each corp.</li> <li>a) incorporated b) transacted business.</li> </ul>	at be submitted as an att oration and the person or ) The dates of corporate of	achiment to this report for each person subject persons involved: 2) The state in which each penation	t to the statement above corporation was
12. SIGNATURES			there water and with the
signalures will be rejected.		authorized officer. Annual Reports such	
ARIZONA REVISED STATUTES HAVE B	EEN FILED WITH THE A	TE INCOME TAX RETURNS REQUIRED B RIZONA DEPARTMENT OF REVENUE.	
I further declare under penalty of law th to the best of my (our) knowledge and	nat I (we) have examined belief they are true, corr	this report and the certificate, including a ect and complete.	
Name_Harry Pation		lameKelly McLear	_Date_2-7-01
Signature	•	ignature	
Title <u>President</u> (Signator(s) must be	duly authorized corpora	Title Secretary te officer(s) listed in section 7 of this repo	prt.)