

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



DUE ON OR BEFORE 12/3
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FY00-01

FILING FEE \$45.00

DUE ON OR BEFORE 12/10/2000	and the analysis of registration Arizona Revised
DUE ON OR BEFORE 12/16/2000  The following information is required by A.R.S. §§10-1622 & 10-11622 for a support of the commission's suthority to prescribe Statutes, Title 10. The Commission's suthority to Mel. Mel.	all corporations organized by this form is A.R.S. \$\$10-121.A. & 10-3121.A.
Statutes, Title 10. The Commission's authority to prescribe yours are the status of the corporation.	
for the report should reflect the current status of the constitutions on PAGE 4.	A.C.C. CORPORATIONS DIV

A.C.C. CORPORATIONS DIV. RECEIVED -0250570-0 JAN 0 9 2002 301 E VIRGINIA #3500 1.0. Bux 170 MARICOPA, AZ. DOCUMENTS ARE SUBJECT PRHOENIX, AZ 85004 85239 TO REVIEW BEFORE FILING DELINQUENT ANNUAL REPORT 10/15/2001; CONTACT THE COMMISSION AT 542-32851 Business Phone: Type of Corporation: PROFIT State of Domicile: ARIZONA ROBGET RALSTON RO. 53544 10. FARRELL RO. THOMAS A MCCARVILLE Arizona Statutory Agent: 2 501 W MARSHALL ST CASA GRANDE, AZ 85230 MARICOPA AZ. Street Address: City, State, Zip: Use this box only if appointing a new Statutory Agent l acciónding à <u>neus apenado</u> a agent, thavaien agant la CST careacan a tha an a thaire an a Signatig Calcae ACC USE ONLY 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. Expedite \$ A.C.C. CORPORATIONS DIV. Signature of new Statutory Agent Resubmit \$ RECEIVED. 00334112/ MAR 2 7 2002 3. Secondary Address: DOCUMENTS ARE SUBJECT

JO REVIEW REFORE FILING

au - I wa ana antaoni l	Delow which best describes the CHARA	CTER OF BUSINESS of your or
Check the one category to Business Corp	OPATIONS	NON-PROFIT CORPORATIO
	20. Manufacturing	1 Charitable
1. Accounting	21. Mining	2 Benevolent
2. Advertising	22. Nevra Media	3 Educational
3. Aerospace	23. Phermeceutical	4 CMo
4. Agriculture	24 Publishing/Printing	5 Political
5. Architecture	25. Ranching/Livestock	6 Religious
6. Benking/Finance	26. Real Estate	7 Social
7. Burbers/Coemetology	27. Restaurant/Bar	a. Uterary
a. Construction	28. Retail Sales	O Company
9. Contractor	29. Science/Research	9 Cultural
10. Credit/Collection	30. Sports/Sporting Events	10. Athletic
11. Education	31. Technology(Computers)	11. Science/Research
12. Engineering	32. Technology(General)	12. Hospital/Health Care
13. Entertainment	33. Television/Radio	13 Agricultural
14. General Consulting	34. Tourism/Convention Services	14 Animal Husbandry
15. Heelth Care	Transportation	15. Homeowner's Associatio
18. Hotel/Motel	35. Transportation	16. Professional, commercia
17. import/Export	38. Utilities 27. Veterinary Medicine/Animal Care	industrial or trade seacci
18. Insurance	37. Yelennery Medicine raints 5—5	17 Other

\_38. Other

19. Legal Services

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lumber of Shares/Certificates Authorized	Class	Series Within Class (if any)
(,000,000.	Common	1.00
umber of Shares/Certificates Issued	Class	Series Within Class (if any)
100	Comman	1.00
SHAREHOLDERS: (Gaines Carpstatus at		are <b>REQUIRED</b> is completely and leading to the corporation, or having more than a 20%
neficial interest in the corporation.	SE TYPE OR PE	INT CLEARLY.
Name: JACK L. Rac	Crop	Name:
ONE Name:		Name:
		Neuris.
OFFICERS PLEASE TYPE OR PRINT		0 K L -
me: JACG L. RALETON		me: Co. ROBERT KALSTON
10: PRESIDENT/CED	Tit	10: STATUTONY ACCUTE LA
dress: 1263 Auguina ELENA		dress: 53544 W. CARREL Ro.
CG., Az 85222	•	MARIGORA, Az. 85235
te taking office: 4-15-93	Da	te taking office: $1-9-62$
me: CHARLIE NICHOLS		me: CHARLIE NICHOLS
le: Secretary	Tit	e: TREASURGE
dress: 1652 W. Mesalland	Ad	dress: 1652 W. MERNEAR
4-15-93 C.G. Az		C.C., Az. 85222
te taking office: 4-15-93		te taking office: 4-15-93
DIRECTORS PLEASE TYPE OR PRINT		
me: TACK L. RALSTON		me: THOMAS A. McARVILLE
CHSA GRANCE AZ. PSZZ	Ad	dress: P.O. Roy 15005
CHSA GRANCE, AZ. PSZT	12	CACAGRANOR Az. 85222
te taking office: 4-15-93	Da	te taking office: $4-15-93$
me;	Na	me:
dress:	Ad	dress:
ate taking office:	Da	te taking office:

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WILLIAM A. MUNDELL CHAIRMAN

BRIAN C. MCNEIL

JOANNE C. MACDONNELL
DIRECTOR, CORPORATIONS DIVISION

## JIM IRVIN COMMISSIONER

MARC SPITZER COMMISSIONER

## **ARIZONA CORPORATION COMMISSION**

CORPORATIONS DIVISION
1300 West Washington
Phoenix, Arizona 85007-2929

JACK, INC. PO BOX 170

MARICOPA

AZ 85239-

Date: 02/20/2002

File No: -0250570-0

Original Due Date:

December 16, 2000

Received: 01/09/02

We have deposited your check, however your annual report is being returned for the following reason(s):

> The name and street address of the corporation's Statutory Agent in Arizona is not listed. If a new agent is being appointed, this report MUST BE SIGNED by any officer and the new agent must consent to this appointment by signing the report in the space provided on the first page.

NOTE: PURSUANT TO A.R.S. 10-1622.F. TO AVOID PENALTIES AND POSSIBLE ADMINISTRATIVE DISSOLUTION, THIS REPORT MUST BE RETURNED WITHIN 30 DAYS AFTER THE EFFECTIVE DATE OF THIS NOTICE TO BE DEEMED TIMELY FILED.

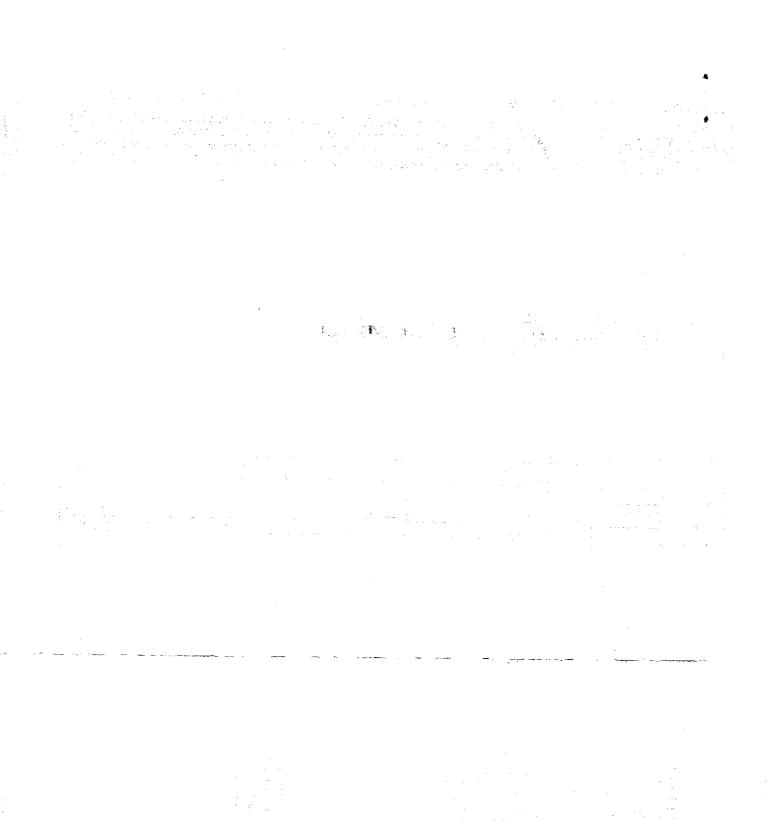
\* \* IMPORTANT \* \*

TO SUCCESSFULLY PROCESS YOUR DOCUMENT, IT IS IMPERATIVE THAT YOU RETURN:

- 1) A COPY OF THIS LETTER,
- 2) ANY ANNUAL REPORT(S) WHICH ACCOMPANIED THIS LETTER, (CORRECTIONS MADE)
- 3) ANY OUTSTANDING FEE,
- 4) ANY OUTSTANDING PENALTY FUNDS

Corporations Division Telephone: 602-542-3285

AR: 0021 REV. 04/2000



• *			Page 3
Nease Enter Corporation Name:		0250570-0	-
FINANCIAL DISCLOSURE (A.R.S. § Nonprofit corporations <u>must attach</u> a financia corporations are exempt from filing a financia	ai statement (Dalance Si	2.A.9) heet including assets, liabilities and equity).	All other forms of
A. <u>MEMBERS</u> (A.R.S. § 10-11622.A.6)	Nonprofit Corporation	s Only.	
This corporation does	does not 🕾	nave members.	
10% of the issued and outstanding common sha Linderlined portion pertains to profit corp	portitions only]	roprietary, beneficial or membership interest in	
<ol> <li>Convicted of a felony, the essential elemer monopoly in any state or federal jurisdicts.</li> <li>Or are subject to an injunction, judgment immediately preceding execution of this</li> </ol>	ints of which consisted of fra tion within the seven yea, decree or permanent ord certificate where such in	fraud or antitrust in any state or federal jurisdiction and, misrepresentation, theft by false pretenses of ar period immediately preceding execution of her of any state or federal court entered within to junction, judgment, decree or permanent ord	or restraint of trade or this certificate? he seven year period
<ul><li>(a) fraud or registration provisions of</li><li>(b) the consumer fraud laws of that</li><li>(c) the antitrust or restraint of trade</li></ul>	laws of that jurisdiction?	?	
One box must be marked:	YES 🗆	NO 🗷	
If "YES", the following information must be sul in Items 1. through 3. above.	bmitted as an attachment	to this report for each person subject to one or mo	re of the actions stated
<ol> <li>Full name and prior names used.</li> <li>Full birth name.</li> <li>Present home address.</li> <li>Prior addresses (for immediate preceding 7 year period).</li> </ol>	5. 6. 7.	Date and location of birth. Social Security Number The nature and description of each conviction date and location; the court and public agenc or cause number of the case.	on or judicial action; the by involved, and the file
11. STATEMENT OF BANKRUPTCY ( Has ANY person serving either by election of more than 20% of the issued and outstanding corporation served in such capacity or he revocation of the other corporation? [Under the corporation of the other corporation?]	ng common shares or 20	% of any other proprietary, beneficial or mem	controlling or holding bership interest in the ceivership, or charter
Gre pox must be marked:	YES 🗆	NO 🗵	
Chapter	Date Filed	Case Number	
a week the tollowing information must	a be autom attact us an a	tactument to this report for each paracin aud) r persons involved: 2) The state in which ea operation.	sc: le the statement allove sh corporation was
12. SIGNATURES			anna menerara programa anti talik 1900 kiloka 1900 kiloka 1900 kiloka 1900 kiloka 1900 kiloka 1900 kiloka 1900
eleviations and the relected.		authorized officer. Amusi Reports subt	•
I DECLARE, UNDER PENALTY OF LAV	CEM LIPPO MALLA LIVE :	ATE INCOME TAX RETURNS REQUIRED ARIZONA DEPARTMENT OF REVENUE.	
I further declare under penalty of law the to the best of my (our) knowledge and	at I (we) have examine belief they are true, co	d this report and the certificate, including rrect and complete.	
Name ROBERT PAYSTE		Name	Date
Signature		Signature	
Title STAST TORY AGE	duly authorized corpor	Title ate officer(s) listed in section 7 of this rep	port.)
(Signatoria) intost be		·	

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