



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

Arizona Corporation Commission



DUE ON OR BEFORE 04/23/2002

FY01-02

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.

1. -0143119-8
SKP CO-OP R.V. RETREAT, INC.
MONTGOMERY & SELMA RDS
3241 S MONTGOMERY RD
CASA GRANDE, AZ 85222

RECEIVED
MAR 15 2002

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: _____
State of Domicile: **ARIZONA** Type of Corporation: **NON-PROFIT**

2. Arizona Statutory Agent: **GARYE L VASQUEZ**
Street Address: **501 N MARSHALL ST**
PO BOX 15005
City, State Zip: **CASA GRANDE, AZ 85222**

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ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Use this box only if appointing a new Statutory Agent

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

ACC USE ONLY

Fee \$ 10
Penalty \$ _____
Reinstate \$ _____
Expedite \$ _____
Resubmit \$ _____

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

- ☐ 1. Accounting
- ☐ 2. Advertising
- ☐ 3. Aerospace
- ☐ 4. Agriculture
- ☐ 5. Architecture
- ☐ 6. Banking/Finance
- ☐ 7. Barbers/Cosmetology
- ☐ 8. Construction
- ☐ 9. Contractor
- ☐ 10. Credit/Collection
- ☐ 11. Education
- ☐ 12. Engineering
- ☐ 13. Entertainment
- ☐ 14. General Consulting
- ☐ 15. Health Care
- ☐ 16. Hotel/Motel
- ☐ 17. Import/Export
- ☐ 18. Insurance
- ☐ 19. Legal Services
- ☐ 20. Manufacturing
- ☐ 21. Mining
- ☐ 22. News Media
- ☐ 23. Pharmaceutical
- ☐ 24. Publishing/Printing
- ☐ 25. Ranching/Livestock
- ☐ 26. Real Estate
- ☐ 27. Restaurant/Bar
- ☐ 28. Retail Sales
- ☐ 29. Science/Research
- ☐ 30. Sports/Sporting Events
- ☐ 31. Technology(Computers)
- ☐ 32. Technology(General)
- ☐ 33. Television/Radio
- ☐ 34. Tourism/Convention Services
- ☐ 35. Transportation
- ☐ 36. Utilities
- ☐ 37. Veterinary Medicine/Animal Care
- ☐ 38. Other _____

NON-PROFIT CORPORATIONS

- ☐ 1. Charitable
- ☐ 2. Benevolent
- ☐ 3. Educational
- ☐ 4. Civic
- ☐ 5. Political
- ☐ 6. Religious
- ☐ 7. Social
- ☐ 8. Literary
- ☐ 9. Cultural
- ☐ 10. Athletic
- ☐ 11. Science/Research
- ☐ 12. Hospital/Health Care
- ☐ 13. Agricultural
- ☐ 14. Animal Husbandry
- ☐ 15. Homeowner's Association
- ☐ 16. Professional, commercial
Industrial or trade association
- ☐ 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)

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.**

Name: _____

Name: _____

NONE ☐

Name: _____

Name: _____

7. OFFICERS **Please Type or Print Clearly.**

Name: WYNDOLL STEPHENS

Name: MARY STUART

Title: PRESIDENT

Title: VICE PRESIDENT

Address: 713 W SPRUCE ST

Address: PO BOX 371

DEMING NM 88030

SOUTH COLTON NY 13687

Date taking office: 2/14/02

Date taking office: 2/14/02

Name: SANDY POTTS

Name: CECIL ADKINS

Title: SECRETARY

Title: TREASURER

Address: 131 NW 20th #D

Address: 173 RAINBOW DR # 7322

NEWPORT OR 97265

LIVINGSTON TX 77399

Date taking office: 2/14/02

Date taking office: 2/14/02

8. DIRECTORS **Please Type or Print Clearly.**

Name: TOM HORN

Name: TOM YINGLING

Address: 800 S STATE ST #178

Address: 5105 FARMINGDALE DR

SUTHERLIN OR 97479

COLOEADO SPRINGS CO 80917

Date taking office: 2/14/02

Date taking office: 2/14/02

Name: DALE LAND

Name: PHIL SOIKE

Address: 121 RAINBOW DR

Address: PO BOX 247

LIVINGSTON TX 77399-1021

CUSIK WA 99119

Date taking office: 2/14/02

Date taking office: 2/14/02

SKP CO-OP RV RETREAT, INC
STATEMENT OF ASSETS, LIABILITIES
AND EQUITY-INCOME TAX BASIS
DECEMBER 31, 2001

ASSETS

Cash-Working Cash	\$	500
Cash-Lot Account-1462		489
Cash-Manager's Acct 9517		11,460
Cash-Park Account 15569		2,575
Cash-Money Market		50,693

TOTAL CURRENT ASSETS		<u>81,987</u>
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PROPERTY AND EQUIPMENT

Land	40,000
Land Improvements	167,942
Co-op Lot #1	2,145
Co-op Lot #20	3,185
Sign	779
Buildings	43,665
Road Improvements	76,522
Vehicles	2,747
Telephone System	13,621
Machines & Equipment	19,700
Accumulated Depreciation	<u>(120,946)</u>

TOTAL PROPERTY AND EQUIPMENT	<u>249,360</u>
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OTHER ASSETS

Deposits	600
Organizational Expense	<u>5,049</u>

TOTAL OTHER ASSETS	<u>5,649</u>
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TOTAL ASSETS	<u>\$ 336,996</u>
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SKP CO-OP RV RETREAT, INC
STATEMENT OF ASSETS, LIABILITIES
AND EQUITY-INCOME TAX BASIS
DECEMBER 31, 2001

LIABILITIES AND EQUITY

LIABILITIES

Lot Payments Held	11,952
Federal Tax Withheld	15
State Tax Withheld	412
N/P - Legal reserve	<u>2,798</u>

TOTAL CURRENT LIABILITIES 15,177

EQUITY

Contributed Capital	67,400
Retained Earnings	248,866
YTD NET INCOME	<u>5,553</u>

TOTAL EQUITY 321,819

TOTAL LIABILITIES AND EQUITY \$ 336,996

SKP CO-OP RV RETREAT, INC
STATEMENT OF REVENUES AND
EXPENSES-INCOME TAX BASIS
For One Month and Twelve Months Ended
December 31, 2001

	---CURRENT PERIOD---		---YEAR TO DATE---	
REVENUES				
Rental Income Co-Op	\$ 12,893	92.27	\$ 59,951	48.93
Dividend income	4	0.03	4	0.00
Investment Income	94	0.67	2,271	1.85
Donations	(1,292)	(9.25)	0	0.00
Income From Waiting List	70	0.50	325	0.27
Showers	51	0.36	359	0.29
Laundry	861	6.16	6,322	5.16
Electricity	1,744	12.48	14,143	11.54
Water RO	251	1.80	1,643	1.34
Other	0	0.00	995	0.81
Xerox Copies	32	0.23	232	0.19
Postage Reimbursed	(47)	(0.34)	(47)	(0.04)
Fax	27	0.19	179	0.15
Lot Turnover	10	0.07	120	0.10
Park Maintenance Fund	38	0.27	36,037	29.41
Legal fees	(763)	(5.46)	0	0.00
TOTAL REVENUES	13,973	100.00	122,534	100.00
EXPENSES				
Consultant	0	0.00	2,124	1.73
Depreciation	7,778	55.66	7,778	6.35
Dues & Subscriptions	0	0.00	23	0.02
Electricity	5,518	39.49	11,517	9.40
Electricity-Lots	0	0.00	15,247	12.44
Gas	127	0.91	1,447	1.18
Water	426	3.05	3,792	3.09
Postage	45	0.32	842	0.69
Insurance	0	0.00	7,734	6.31
Laundry	0	0.00	245	0.20
Legal & Accounting	408	2.92	4,434	3.62
Legal	3,102	22.20	4,928	4.02
Other Expenses	131	0.94	173	0.14
Bank Charges	176	1.26	403	0.33
Office Equipment	0	0.00	132	0.11
Office Supplies	580	4.15	3,837	3.13
Park Maintenance Fund	123	0.88	255	0.21
Bldg Maintenance & Repair	464	3.32	1,529	1.25
Janitor	260	1.86	854	0.70
Equipment Maintenance	0	0.00	414	0.34
Park Maintenance	934	6.68	4,662	3.80
Trash	440	3.15	1,874	1.53
Salaries	2,778	19.88	32,835	26.80

See accountants' report.

SKP CO-OP RV RETREAT, INC
STATEMENT OF REVENUES AND
EXPENSES-INCOME TAX BASIS
For One Month and Twelve Months Ended
December 31, 2001

Federal Unemployment Tax	0	0.00	218	0.18
State Unemployment Tax	0	0.00	32	0.03
Fica Taxes	213	1.52	2,679	2.19
State Income Tax	0	0.00	50	0.04
Taxes-Sales Tax	(141)	(1.01)	966	0.79
Taxes-Licenses & Permits	0	0.00	4,906	4.00
AZ Corporation Commission	0	0.00	10	0.01
Telephone	<u>80</u>	<u>0.57</u>	<u>1,041</u>	<u>0.85</u>
 TOTAL EXPENSES	 <u>23,442</u>	 <u>167.77</u>	 <u>116,981</u>	 <u>95.47</u>
 EXCESS (DEFICIT) OF REVENUES OVER EXPENSES	 <u>\$ (9,469)</u>	 <u>(67.77)</u>	 <u>\$ 5,553</u>	 <u>4.53</u>

Please Enter Corporation Name: _____

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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.

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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 date 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 executed 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 WYNDOLL STEPHENS Date 3-14-02 Name _____ Date _____

Signature Wyndoll Stephens Signature _____

Title PRESIDENT Title _____

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