



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



00527879

DUE ON OR BEFORE 04/07/2002

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. -0525477-5
ARIZONA COUNCIL FOR ECONOMIC CONVERSION
PO BOX 42108
TUCSON, AZ 85733

RECEIVED

MAY 21 2002

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: (520) 620-1241 (Business phone is optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

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JUL 16 2002

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

2. Arizona Statutory Agent: JIM LOVELACE
Street Address: 3443 N CAMPBELL
TUCSON, AZ 85719

City, State, Zip:

NOV 7 22 02 IPR
573/02

ACC USE ONLY

Fee \$ 10

Penalty \$

Reinstate \$

Expedite \$

Resubmit \$

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

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 checked="" 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) _____
None

Number of Shares/Certificates Issued _____ Class _____ Series Within Class (if any) _____
None

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: Deb Turner

Name: Sandra Johnson

Title: President

Title: Vice-President

Address: 3042 N. Stone

Address: 130 W. Congress 6th floor

Tucson, AZ 85702

Tucson, AZ 85701

Date taking office: 2/19/02

Date taking office: 2/19/02

Name: Bryan Patrick

Name: Jim Lovelace

Title: Secretary

Title: Treasurer

Address: 565 W. Del Rio

Address: P.O. Box 64130

Chandler, AZ 85226

Tucson, AZ 85728-4130

Date taking office: 2/19/02

Date taking office: 2/19/02

8. DIRECTORS Please Type or Print Clearly.

Name: Ruben Teran S.

Name: Lynn Kartchner

Address: P.O. Box 1315

Address: 532 11th Street

Douglas, AZ 85607

Douglas, AZ 85607

Date taking office: 3/14/00

Date taking office: 4/24/01

Name: Richard Woodruff

Name: Edward J. Reis

Address: P.O. Box 31176

Address: P.O. Box 11337 Bldg. 9072, M/S R26

Tucson, AZ 85751-1176

Tucson, AZ 85734-1337

Date taking office: 3/14/00

Date taking office: 2/27/01

Cont. DIRECTORS

Name: Deborah Ann Gronet

TITLE: Member

ADDRESS: 5757 E. 14th Street

Tucson, AZ 85711

Date Taking Office: 2/27/01

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ARIZONA COUNCIL FOR ECONOMIC CONVERSION
STATEMENT OF FINANCIAL POSITION

December 31, 2001

Unaudited

ASSETS

Petty Cash	\$ 640.00
Accounts Receivable	\$ 62,935.22
Prepaid Expenses	\$ -
Due From AriSEWna	\$ 86,240.00
Deposits	\$ 2,108.00
Land	\$ 40,000.00
Equipment	\$ 72,483.05
Building	\$ 212,984.45
Accum. Deprec.	\$ (27,910.87)
Total Assets	<u>\$ 449,479.85</u>

LIABILITIES AND NET ASSETS

Liabilities:

Bank Overdraft	\$ 11,837.29
Accounts Payable	\$ 20,496.98
Loan Payable	\$ 40,000.00
Payroll Taxes Payable	\$ 22,612.36
Mortgage Payable	\$ 177,163.55
Client Deposits	\$ 700.00
Deferred Revenue	\$ 57,880.44
Accrued Payroll Taxes	\$ 132.96
NEDC Loan Fund	\$ 3,089.55
Total Liabilities	<u>\$ 333,913.13</u>
Unrestricted Net Assets	<u>\$ 115,566.72</u>
Total Liabilities & Unrestricted Net Assets	<u>\$ 449,479.85</u>

ARIZONA COUNCIL FOR ECONOMIC CONVERSION

STATEMENT OF ACTIVITIES

Year ended December 31, 2001

Unaudited

Revenues:

Grant Revenue	\$ 517,171.52
Matching Contributions	\$ 45,003.40
Program Revenue	\$ 76,754.96
Other Income	\$ 48,787.36
In-Kind Donations	\$ 48,190.14
	<u>\$ 735,907.38</u>

Expenses:

Personnel Expense	\$ 460,783.68
Contract Labor Expense	\$ 62,623.45
Payroll Taxes Expense	\$ 36,158.77
Fringe Benefits Expense	\$ 76,267.54
Professional Fees Expense	\$ 6,760.21
Bank Charges Expense	\$ 680.82
Dues & Subscriptions Expense	\$ 5,351.88
Office Supplies Expense	\$ 27,611.61
Telephone Expense	\$ 22,687.39
Travel Expense	\$ 19,198.94
Rent Expense	\$ 4,200.00
R & M - Equipment Expense	\$ 4,343.38
R & M - Building Expense	\$ 6,478.13
Utilities Expense	\$ 18,476.44
Insurance Expense	\$ 4,003.90
Leasing Expense	\$ 16,162.50
Community Outreach Expense	\$ 2,584.41
Interest Expense	\$ 21,542.31
Penalties & Interest	\$ 620.54
Miscellaneous Expense	\$ 10,962.96
In-Kind Expense	\$ 48,454.47

Total Expenses	<u>\$ 855,953.33</u>
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Change in unrestricted net assets	<u>\$ (120,045.95)</u>
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Unrestricted net assets, Beginning of year 2001	<u>\$ 235,612.67</u>
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Unrestricted net assets, end of year 2001	<u>\$ 115,566.72</u>
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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.

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
a) 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>Deb Turner</u>	Date _____	Name <u>Sandra Johnson</u>	Date <u>04-17-02</u>
Signature <u>Deb Turner</u>		Signature <u>[Signature]</u>	
Title <u>President</u>		Title <u>Vice-President</u>	

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