



COPY

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

AZ Corp. Commission
00678240

DUE ON OR BEFORE 07/26/2001

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.**

RECEIVED RECEIVED

1. -0068893-8

MOHAVE INTERMENT ASSOCIATION INC.
503 MARINA BLVD
BULLHEAD CITY, AZ 86442

MAR 28 2003

DEC 24 2002

ARIZONA CORP COMMISSION ARIZONA CORP COMMISSION
CORPORATIONS DIVISION CORPORATIONS DIVISION

AD-DISSOLVED-FILE ANNUAL REPORT 04/28/2002; CONTACT THE COMMISSION AT 542-32851

Business Phone: _____ (Business phone is optional)

State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: KEVIN HASSETT
Street Address: 5618 RUBY ST SW
BULLHEAD CITY, AZ 86426

no # 9/1/03 City, State, Zip:

No # 12/27/02

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ Pd

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 checked="" 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)
500	A	N/A

Number of Shares/Certificates Issued	Class	Series Within Class (If any)
N/A		

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.

Name: JAMES KEVIN HASSETT

Name:

NONE ☐

Name:

Name:

7. OFFICERS PLEASE TYPE OR PRINT CLEARLY.

Name: JAMES KEVIN HASSETT

Name: JAMES KEVIN HASSETT

Title: President

Title: Treasurer

Address: 5618 Ruby Street SW
Bullhead City, AZ 86426

Address: 5618 Ruby Street SW
Bullhead City, AZ 86426

Date taking office: 5/21/84

Date taking office: 5/21/84

Name: JULIE ANN HASSETT

Name: JULIE ANN HASSETT

Title: Vice President

Title: Secretary

Address: 5618 Ruby Street SW
Bullhead City, AZ 86426

Address: 5618 Ruby Street SW
Bullhead City, AZ 86426

Date taking office: 8/1/86

Date taking office: 8/1/86

8. DIRECTORS PLEASE TYPE OR PRINT CLEARLY.

Name: JAMES KEVIN HASSETT

Name:

Address: 5618 Ruby Street SW
Bullhead City, AZ 86426

Address:

Date taking office: 5/21/84

Date taking office:

Name: JULIE ANN HASSETT

Name:

Address: 5618 Ruby Street SW
Bullhead City, AZ 86426

Address:

Date taking office: 8/1/86

Date taking office:

MOHAVE INTERMENT ASSOCIATION, INC.
BALANCE SHEETS
March 31, 2001 AND 2000

	2001	2000
ASSETS		
Current Assets		
Cash	\$ 130,086.95	\$ 127,866.22
A/R Lots & plots	204,000.00	204,000.00
Employee loans/advances	200.00	0.00
Shareholder loans	0.00	18,338.95
Inventory-mdse	1,800.00	1,800.00
Inventory-lots	586.08	586.08
Lots L/B	22,402.14	20,740.14
Collumbarium	6,331.19	6,331.19
Total Current Assets	<u>365,406.36</u>	<u>379,662.58</u>
Property and Equipment		
Land	132,933.81	104,443.85
Buildings	37,433.98	27,528.98
Furniture & fixtures	47,759.00	47,759.00
Machinery & equipment	17,269.80	17,269.80
Vehicles	4,000.00	4,000.00
Total Property and Equipment	<u>239,396.59</u>	<u>201,001.63</u>
Less accumulated depreciation	(64,175.00)	(59,035.54)
Property and equipment, net	<u>175,221.59</u>	<u>141,966.09</u>
Other Assets		
Organization costs	1,020.00	1,020.00
Accum. amort	(1,020.00)	(1,020.00)
Deposits	300.00	300.00
Total Other Assets	<u>300.00</u>	<u>300.00</u>
	<u>\$ 540,927.95</u>	<u>\$ 521,928.67</u>

See Accountant's Compilation Report.

MOHAVE INTERMENT ASSOCIATION, INC.
BALANCE SHEETS
March 31, 2001 AND 2000

	2001	2000
LIABILITIES AND FUND BALANCE		
Current Liabilities		
Accounts payable	\$ 4,489.96	\$ 0.00
Notes & loans payable	24,902.50	0.00
Accounts payable	0.00	4,206.00
Deferred insurance revenue	204,000.00	204,000.00
Payroll taxes payable	16,446.07	3,199.83
Total Current Liabilities	<u>249,838.53</u>	<u>211,405.83</u>
Long Term Liabilities		
Due to/from MVSC	101,658.55	72,921.15
Due to MVSC-land transfer	62,900.00	62,900.00
Total Long Term Liabilities	<u>164,558.55</u>	<u>135,821.15</u>
Total Liabilities	<u>414,397.08</u>	<u>347,226.98</u>
Fund Balance		
Common stock	70,000.00	70,000.00
Fund balance	56,530.87	104,701.69
Total Stockholder's Equity	<u>126,530.87</u>	<u>174,701.69</u>
	<u>\$ 540,927.95</u>	<u>\$ 521,928.67</u>

See Accountant's Compilation Report.

MOHAVE INTERMENT ASSOCIATION, INC.

STATEMENTS OF REVENUE, SUPPORT & EXPENDITURES

For The One Month And Twelve Months Ended March 31, 2001 and 2000

	CURRENT PERIOD				YEAR TO DATE			
	2001	Percent	2000	Percent	2001	Percent	2000	Percent
Income	\$ 24,755.49	100.0	\$ 35,192.69	100.0	\$ 260,715.89	100.0	\$ 488,117.52	100.0
Cost of Goods Sold	10,630.17	42.9	21,169.47	60.2	128,099.21	49.1	225,956.14	46.3
Gross Profit	14,125.32	57.1	14,023.22	39.8	132,616.68	50.9	262,161.38	53.7
Expenses								
Advertising	(1,009.66)	(4.1)	0.00	0.0	10,700.04	4.1	19,641.30	4.0
Auto and truck expense	0.00	0.0	72.44	0.2	2,842.61	1.1	1,700.29	0.3
Depreciation	1,001.00	4.0	3,558.00	10.1	5,141.00	2.0	3,558.00	0.7
Donations	0.00	0.0	0.00	0.0	1,000.00	0.4	200.00	0.0
Dues and subscriptions	0.00	0.0	0.00	0.0	119.00	0.0	811.00	0.2
Equipment expense	1,052.43	4.3	700.00	2.0	13,043.33	5.0	5,379.74	1.1
Insurance	0.00	0.0	544.00	1.5	0.00	0.0	717.34	0.1
Janitorial	0.00	0.0	0.00	0.0	0.00	0.0	180.00	0.0
Legal & professional serv.	0.00	0.0	0.00	0.0	1,548.42	0.6	1,689.50	0.3
Licenses and fees	0.00	0.0	0.00	0.0	175.00	0.1	0.00	0.0
Meals & entertainment	0.00	0.0	0.00	0.0	0.00	0.0	158.30	0.0
Office expense	2,740.64	11.1	(11.51)	0.0	5,752.42	2.2	3,451.82	0.7
Outside services	0.00	0.0	0.00	0.0	12.50	0.0	48.00	0.0
Payroll tax expense	692.27	2.8	937.74	2.7	9,640.88	3.7	7,898.21	1.6
Penalties	0.00	0.0	0.00	0.0	3,163.45	1.2	1,585.56	0.3
Pest control	0.00	0.0	0.00	0.0	0.00	0.0	70.00	0.0
Repairs & maintenance	734.23	3.0	0.00	0.0	734.23	0.3	195.00	0.0
Salaries	31,023.49	125.3	51,203.73	145.5	31,023.49	11.9	51,203.73	10.5
Security	0.00	0.0	0.00	0.0	524.00	0.2	303.00	0.1
Telephone	585.46	2.4	0.00	0.0	717.60	0.3	362.34	0.1
Travel & lodging	0.00	0.0	20.00	0.1	10.00	0.0	70.00	0.0
Utilities	1,240.29	5.0	176.74	0.5	3,810.24	1.5	3,331.03	0.7
Wages	7,818.20	31.6	5,916.56	16.8	93,659.17	35.9	86,504.83	17.7
Total Expenses	45,878.35	185.3	63,117.70	179.3	183,617.38	70.4	189,058.99	38.7
Interest income-trust	3,545.00	14.3	3,804.31	10.8	3,545.00	1.4	3,804.31	0.8
Interest expense	(570.54)	(2.3)	0.00	0.0	(715.12)	(0.3)	0.00	0.0
Total other income (expense)	2,974.46	12.0	3,804.31	10.8	2,829.88	1.1	3,804.31	0.8
Net income (loss)	\$ (28,778.57)	(116.3)	\$ (45,290.17)	(128.7)	\$ (48,170.82)	(18.5)	\$ 76,906.70	15.8

MORAVE INTERMENT ASSOCIATION, INC.

STATEMENTS OF CHANGES IN FUND BALANCE

For The Twelve Months Ended March 31, 2001 and 2000

	CURRENT PERIOD		YEAR TO DATE	
	2001	2000	2001	2000
Fund balance				
Beginning	\$ 85,309.44	\$ 149,991.86	\$ 104,701.69	\$ 27,794.99
Current Earnings	(28,778.57)	(45,290.17)	(48,170.82)	76,906.70
Fund balance				
Ending	\$ 56,530.87	\$ 104,701.69	\$ 56,530.87	\$ 104,701.69

Allen L. Johnson

Certified Public Accountant
3003 Highway 95, Suite 21
Bullhead City, Arizona 86442

(928) 763-4313

FAX (928) 763-7972

Mohave Interment Association, Inc.
9250 S. Ranchero Lane
Mohave Valley, AZ 86440

I have compiled the accompanying balance sheets of Mohave Interment Association, Inc. (a non-profit organization) as of March 31, 2001 and 2000, and the related statements of revenue, support and expenditures and changes in fund balances for the one month and twelve months then ended, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements information that is the representation of management. I have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or any other form of assurance on them.

Management has elected to omit substantially all of the disclosures and the statement of cash flows required by generally accepted accounting principles. If the omitted disclosures and statement of cash flows were included in the financial statements, they might influence the user's conclusions about the Organization's financial position, results of operations, and cash flows. Accordingly, these financial statements are not designed for those who are not informed about such matter.



November 27, 2001

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

Nonprofit corporations must attach a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.

I. MEMBERS (A.R.S. § 10-11622.A.6) Only Nonprofit Corporations must answer this question.

This corporation **DOES** ☐ **DOES NOT** ☒ have members.

II. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)

Is ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or 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 business corporations only

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?

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?

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 ☒

"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).

III. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.02, 10-1623 10-11623)

Has the corporation filed a petition for bankruptcy or appointed a receiver? One box must be marked: **YES** ☐ **NO** ☒

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or 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 business corporations only

One box must be marked:

YES ☐

NO ☒

"YES" to A and/or B, the following information must be submitted as an attachment to this report for each person subject to the item above.

The names and addresses of each corporation and the person or persons involved. (e.g. officer, director, trustee or major stockholder)

The state in which each corporation was a) incorporated b) transacted business.

The dates of corporate operation.

If any involved person (listed in #1) has been involved in any other bankruptcy proceeding within the past year, the name and address of each corporation.

Date, Case number and Court where the bankruptcy was filed or receiver appointed.

Name and address of court appointed receiver.

IV. SIGNATURES: Annual Reports must be signed and dated by at least one duly authorized officer or they 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 JAMES KEVIN HASSETT Date 12/15/07

Name JULIE ANN HASSETT Date 12/15/07

Signature

Signature

Title President

Title Vice President

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