

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



DUE ON OR BEFORE

04/23/2004

FY03-04

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 on page 4 for proper format.

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

RECEIVED

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ARIZONA CORP COMMISSION CORPORATIONS DIVISION

	(Basilions Prioriting to obtained)
	State of Domicile: ARIZONA Type of Corporation: NON-PROFIT
*	· STATUTORY AGENT MUST HAVE A PHYSICAL ADDRESS.
2.	Statutory Agent: CARVE to VASQUES Veronica Scotiel Physical Address, If Different.
	Mailing Address: 501 N MARSHALL ST PO BOX-15005 324/5 Menty M City, State, Zip:
	PO BOX-15005 324/ 5. 1791/1900 City, State, Zip:
	City, State, Zip: CASA GRANDE, AZ 85222
	Use this box only if appointing a new Statutory

Rusinese Phone: 520-426-3597 (Business phone is optional)

ACC USE ONLY IPR	Use this box only if appointing a new Statutory Agent
Fee \$ 10 3/25/04	If appointing a <u>new</u> statutory agent, the new agent MUST consent to that appointment by signing below.
Penalty \$	I, (individual) or We, (corporation or limited liability company) having been designated the new Statutory Agent,
Reinstate \$	do hereby consent to this appointment until my removal or resignation pursuant to law.
Expedite \$	X Verones Scofield Signature of new Statutory Agent
Resubmit \$	Veronica Scofield
754814	Printed Name of <i>new</i> Statutory Agent

3. Secondary Address:

(Foreign Corporations are <u>REQUIRED</u> to complete this section).

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

<u> </u>	POHATIONS	NON-PROFIT COMPORATIONS
Accounting	20. Manufacturing	1 Charitable
2. Advertising	21. Mining	2 Benevolent
3 Aerospace	22. News Media	 Educational
4. Agriculture	23. Pharmaceutical	4 Civic
5, Architecture	24. Publishing/Printing	5 Political
6. Banking/Finance	25. Ranching/Livestock	6. Religious
7. Barbers/Cosmetology	26. Real Estate	7 Social
8. Construction	27. Restaurant/Bar	B Literary
9. Contractor	., 28. Retail Sales	9. Cultural
10. Credit/Collection	29. Science/Research	10 Athletic
11. Education	30. Sports/Sporting Events	11 Science/Hesearch
12. Engineering	31. Technology(Computers)	12 (Hospital/Health) Care
13. Entertainment	32. Technology(General)	13 Agricultural
14. General Consulting	33. Television/Radio	14 Animal Husbandry
🌊 15. Health Care	34. Tourism/Convention Services	 Homeowner's Association
16. Hotel/Motel	35. Transportation	16. Professional, commercial
17. lmport/Export	36, Utilities	industrial or trade association
18. Insurance	37. VeterInary Medicine/Animal Care	17. X Other RV Park
19. Legal Services	38. Other	. — . —

-0143119-8 SKP CO-OP R.V. RETREAT, INC.				
5. CAPITALIZATION: (Business Corporations and Business Trus	Page 2 sts 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. Please examine the corporation's original Articles of Incorporation for the amount of shares authorized. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of shares issued. Please Print or Type Clearly.				
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 Tr	usts are REQUIRED to complete this section.)			
List shareholders holding more than 20% of any class of share beneficial interest in the corporation. Please Type or Pr:	es issued by the corporation, or having more than a 20% int Clearly.			
Name:	Name:			
NONE Name:	Name:			
7. OFFICERS Please Type or Print Clearly. Yo				
Name: Mary Stuart	Name: Keith Morgan			
Title: President	Name: Keith Morgan Title: Secretary			
Address: 324/ S. Montgomery Rd	Address: 3241 S. Montgomery Rd Casa Grande, AZ 85222			
<u>Casa Grande, AZ 85222</u>	<u>Casa Grande, AZ 85222</u>			
Date taking office: Feb 2002	Date taking office: Feb 2003			
Name: Larry Peterson	Name: Tim Shideler			
Title: <u>Vice President</u>	,			
Address: 3241 S. Montgomery Rd	Address: 3241 S. Montgomery Rd			
	Casa Grande, AZ 85222			
<i>9</i>	Date taking office: Nov 2003			
8. DIRECTORS Please Type or Print Clearly. Y				
Name: Tom Ying ling				
Address: 3241 S. Montgomery Rd.	Address: 3241 S. Montgomery Rd			
Casa Grande, AZ 85222	Casa Grande, AZ 85222			
Date taking office: Feb 2002	Date taking office: Feb 2004			
Name: Swanee Haddock	Name: <u>Tack Buettner</u>			
Address: 3241 S. Montgomery Rd.	Address: 3241 S. Montgomery Rd.			
Casa Grande, AZ 85222	Casa Grande, AZ 85222			

Date taking office: Feb 2003

Date taking office: Feb 2004

11:39 AM 03/15/04

Accrual Basis

SKP CO-OP Balance Sheet

As of February 29, 2004

Feb 29, 04 ASSETS **Current Assets** Checking/Savings 115.08 Adjustments First American CU 5.12 \$000 Credit Union Membership 20,056.67 \$010 Manager Account 26,536.44 S011 Lot Acct 30,438.52 S040 Market Share Acct-Legal S041 Market Share Acct-Cash Flo 32,018.62 33,239.57 S042 Allocated Funds (pre2004) 142,294.94 Total First American CU 47.19 Office - Petty Cash SunState Bank 942.48 Park Account 942.48 **Total SunState Bank** 143,399.69 **Total Checking/Savings** Accounts Receivable 22,781.09 Accounts Receivable 22,781.09 Total Accounts Receivable 166,180.78 **Total Current Assets** 166,180.78 **TOTAL ASSETS LIABILITIES & EQUITY** Liabilities **Current Liabilities** Other Current Liabilities Lease Lot Activity 8,130.52 Lot Purchase 2,505.00 Top 25 10,635.52 **Total Lease Lot Activity** 523.89 **Payroll Liabilities** -5.33Sales Tax Payable 11,154.08 **Total Other Current Liabilities** 11,154.08 **Total Current Liabilities** 11,154.08 **Total Liabilities** Equity 116,799.95 Opening Bal Equity -2,190.65 Retained Earnings 40.417.40 **Net Income** 155,026.70 **Total Equity** 166,180.78 **TOTAL LIABILITIES & EQUITY**

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SKP CO-OP Profit & Loss

January 1 through March 15, 2004

	Jan 1 - Mar 15, 04
Ordinary Income/Expense	
Income	187.41
A, Interest (Bank) B, Coin Raking	107.41
1. Copies	78.15
2. Donations	196.60
3. Fax	120.75
4. Laundry	2,511.25 95.72
6. Lobby Phone	639.26
6. RO Water 7. Showers	197.65
Total B. Coin Raking	3,839.38
- -	·
C. Rental Pool Electric 1. Basic Service Charge	1,278.52
2. kWh Charge	4,956.81
3. Environmental Surcharge	48.90
4. Regulatory Assessment	13.14
5. Sales Tax	415.65
6. Rental Electric Flat Rate	1,300.00 -1.54
C. Rental Pool Electric - Other	
Total C. Rental Pool Electric	8,011.48
D. Leaseholders Income	24.064.20
1. Rental Pool	21,064.39 1,315.09
2. Boondock 3. Lot Taxes	220.21
4. M & O	55,514.20
6. Rental Pool Credits	-29,996.12
6. Waiting List	200.00
Total D. Leaseholders Income	48,317.77
E. Miscellaneous Income	
1. Stephen's Phone Donation	367.00
Roof Raiser's Septic Don.	4,000.00
3. Miscellaneous Income - Other	34.85
Total E. Miscellaneous Income	4,401.85
Total Income	64,757.89
Expense	
A. Bank Charges	77.47
B, Insurance	7,034.33
D. Management	3,000.00
01. Manager's Salary 02. Asst Manager's Salary	2,000.00
03. Bookkeeper's Salary	800.00
05. FICA-SS COOP	360.79
06. FICA-Med COOP	84.40
07. FUTA Unemployment COOP	46.55 40.17
08, AZ SUTA Unemployment COOP 09, Workmans Comp	693.00
10. Management - Other	-2,727.23
D. Management - Other	3,200.00
Total D. Management	7,497.68
E. Miscellaneous Expense	-6.76
F. Office	-
1. Copier	1,188.36 710.84
2. Office Equipment	710.64 129.48
3. Mailstation 4. Postage	141.49
4. Postage 5. Supplies	327.48
7. Office - Other	10.93
Total F. Office	2,508.58
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03/15/04 Cash Basis

SKP CO-OP

Profit & Loss January 1 through March 15, 2004

L. Legal Assessment 30,000.00 M. Lot Transfer Fee refunds 100.00 Total Expense 71,410.52 Net Ordinary Income -6,652.63 Other Income/Expense		Jan 1 - Mar 16, 04
H. Professional Fees 1. Accounting Total H. Professional Fees 1. 1,157.00 I. Taxes (Corporate Property) 50.00 I. Taxes (Corporate Property) 50.00 I. Electric (COOP, Lots 1 & 20) 2. Electric (Rental Pool) 3. Meter Turn-ons 4. Natural Gas 5. Telephone 6. Trash 600.00 7. Water Total J. Utilities 10,568.35 K. Capital Outlay (Washer) L. Legal Assessment M. Lot Transfer Fee refunds Total Expense Net Ordinary Income Other Income/Expense Other Income/Expense Other Income 7. J. 1,157.00	1. Building Maintenance 2. Common Area (not Electric) 4. Laundry Repairs 5. PCM	3,037.39 208.75 321.43
1. Accounting Total H. Professional Fees 1.157.00 I. Taxes (Corporate Property) J. Utilities 1. Electric (COOP, Lots 1 & 20) 2. Electric (Rental Pool) 3. Meter Turn-ons 4. Natural Gas 5. Telephone 6. Trash 600.00 7. Water Total J. Utilities 10,568.35 K. Capital Outlay (Washer) L. Legal Assessment M. Lot Transfer Fee refunds Total Expense Other Income/Expense Other Income/Expense Other Income/Expense Other Income 1,157.00	Total G. Park Maintenance	10,807.77
Taxes (Corporate Property) 50.00 J. Utilities 1. Electric (COOP, Lots 1 & 20) 899.73 2. Electric (Rental Pool) 6,751.52 3. Meter Turn-ons 25.00 4. Natural Gas 1,023.21 5. Telephone 443.61 6. Trash 600.00 7. Water 825.28 Total J. Utilities 10,568.35 K. Capital Outlay (Washer) 1,616.10 L. Legal Assessment 30,000.00 M. Lot Transfer Fee refunds 71,410.52 Net Ordinary Income -6,652.63 Other Income/Expense Other Income/Expense 0,775.00 Other Income/Expense 77,410.52 Other Income/Expense 77,410.52 Other Income/Expense 77,500.00 Other Income 77,500.00 Other In	1. Accounting	
J. Utilities 1. Electric (COOP, Lots 1 & 20) 2. Electric (Rental Pool) 3. Meter Turn-ons 4. Natural Gas 5. Telephone 6. Trash 7. Water Total J. Utilities K. Capital Outlay (Washer) L. Legal Assessment M. Lot Transfer Fee refunds Total Expense Net Ordinary Income Other Income/Expense Other Income/Expense Other Income 899.73 6,751.52 6,751.52 899.73 600.00 600.00 600		, , , , , , , , , , , , , , , , , , ,
K. Capital Outlay (Washer) L. Legal Assessment M. Lot Transfer Fee refunds Total Expense Net Ordinary Income Other Income/Expense Other Income 7 1,410.52	J. Utilities 1. Electric (COOP, Lots 1 & 20) 2. Electric (Rental Pool) 3. Meter Turn-ons 4. Natural Gas 5. Telephone 6. Trash	6,751.52 25.00 1,023.21 443.61 600.00 825.28
L. Legal Assessment 30,000.00 M. Lot Transfer Fee refunds 100.00 Total Expense 71,410.52 Net Ordinary Income 6,652.63 Other Income/Expense Other Income	Total J. Utilities	
Net Ordinary Income -6,652.63 Other Income/Expense Other Income	L. Legal Assessment M. Lot Transfer Fee refunds	1,616.10 30,000.00 100.00
Other Income Other Income Other Income	Total Expense	/1,410.32
Other Income	Net Ordinary Income	-6,652.63
	Other Income	6,785.00
Total Other Income 6,785,00	Total Other Income	6,785.00
Net Other Income 6,785.00	Net Other Income	6,785.0 <u>0</u>
Net Income 132.37	Net income	132.37

Please Enter Corporation Name: SKP COOP RV Refreat, Inc. File number 0143 119-8 Page 3
9. <u>FINANCIAL DISCLOSURE</u> (A.R.S. §10-11622.A.9) Nonprofit corporations <u>must attach</u> 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.
9A. <u>MEMBERS</u> (A.R.S. § 10-11622.A.6)
Only Nonprofit Corporations must enswer this question. This corporation DOES DOES NOT have members.
10. <u>CERTIFICATE OF DISCLOSURE</u> (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 <u>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]</u>
 Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the sever 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 I NO 🖾
If "YES", the following information <u>must be submitted</u> as an attachment to this report for each person subject to one or more of the actions stated in Items 1, through 3, above.
 Full name and prior names used. Full birth name. Social Security Number Present home address. Prior addresses (for immediate preceding 7 year period). Pate and location of birth. Social Security Number 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.
11. <u>STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION</u> (A.R.S. §§10-202.D.2, 10-3202.D.2, 10-1623 & 10-11623)
A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box must be marked: YES D NO 🗵
B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR held or controller
over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state of
[Underlined portion pertains to business corporations only] One box <u>must</u> be marked: YES NO X
 If "YES" to A and/or B, 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. (e.g. officer, director, trustee or major stockholder) 2. The state in which each corporation was a) incorporated b) transacted business. 3: The dates of corporate operation. 4. 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. 5. Date, Case number and Court where the bankruptcy was filed or receiver appointed. 6. Name and address of court appointed receiver.
12. 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 filled 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.
Signature May M. Streat Signature
Name Mary M. 5+uant Date 3/17/04 Name Date Signature Mary M. Stuart Signature Title President Board & Durectors Title (Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)