



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

AZ Corp. Commission



01271899

DUE ON OR BEFORE 04/03/2005

FY04-05

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. -0075151-3
BRIDGE CANYON RECREATION ASSOCIATION
PO BOX 418
SELIGMAN, AZ 86337

RECEIVED

JUL 15 2005

RECEIVED

MAR 30 2005

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: 928-699-6634 (Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Statutory Agent: ROBERT J LAW Physical Address, if Different.
Mailing Address: 3032 LONDON BRIDGE RD Physical Address: 3064 El Capitan Rd
City, State, zip: LAKE HAVASU CITY, AZ 86404 City, State, zip: Seligman, Az 86337
NO 7-21-05 P.O. Box 631 Seligman, Az 86337

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ 10 4/4/05

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.

Cheryl McMurray

Signature of new Statutory Agent

Cheryl McMurray

Printed Name 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

- 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. **Please Print or Type Clearly.**

5a. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized**.

Number of Shares/Certificates **Authorized** Class Series Within Class (if any)

5b. 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**.

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. You Must List at Least One.

Name: Carol Casteel

Title: President

Address: 560 Knob Hill Dr
Lake Havasu City, Az

Date taking office: 1/1/05 86403

Name: Mike Campbell

Title: Vice President

Address: P.O. Box 677
Seligman, Az 86337

Date taking office: _____

Name: Cheryl McMurray

Title: Treas.

Address: P.O. Box 631
Seligman, Az 86337

Date taking office: 1/1/05

Name: _____

Title: _____

Address: _____

Date taking office: _____

8. DIRECTORS Please Type or Print Clearly. You Must List at Least One.

Name: Gail Hancock

Address: P.O. Box 984
Seligman, Az 86337

Date taking office: 1/1/05

Name: Robert Allred

Address: P.O. Box 5517
Lake Havasu City Az

Date taking office: 1/1/05 86404

Name: William Boogs

Address: P.O. Box 298
Seligman, Az 86337

Date taking office: 1/1/05

Name: _____

Address: _____

Date taking office: _____

Barbara J. O'Connor CPA
2800 Edgewood Drive
Lake Havasu City, AZ 86406
VOICE (928) 855-9186 FAX (928) 855-8119

To the Board of Directors ✓
Bridge Canyon Recreation Association, Inc.
Seligman, Arizona

I have compiled the accompanying statement of assets, liabilities, & equity--income tax basis, of Bridge Canyon Recreation Association, Inc. as of December 31, 2004 and the related statement of revenues and expenses--income tax basis, for the year and year-to-date period 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. The company's policy is to prepare its financial statements on the accounting basis used for income tax purposes. Accordingly, the financial statements referred to above are not intended to present financial position and results of operations, in conformity with generally accepted accounting principles.

Management has elected to omit substantially all of the disclosures required for the income tax basis of reporting. If the omitted disclosures were included in the financial statements, they might influence the user's conclusions about the company's assets, liabilities, equity, revenues and expenses. Accordingly, these financial statements are not designed for those who are not informed about such matters.

Barbara J O'Connor CPA PC

March 15, 2005

✓
Bridge Canyon Recreation Assn., Inc.
Statement of Assets, Liabilities & Equity
December 31, 2004

ASSETS

Current Assets		
Petty Cash	\$	13.52
Regular Checking		1,722.17
Money Market Account		65,667.69
Stockman's Bank CD 880300611		30,000.00
FISN - Acct #A6R032476		95,000.00
Ford Note 88908		20,000.00
Prepaid Expenses		1,112.17
Total Current Assets		213,515.55
 Property and Equipment		
Furniture and Fixtures		7,049.00
Equipment		20,505.77
Solar Equipment		20,701.00
Building		176,165.00
Building Improvements		6,201.25
Land		15,770.00
Land Improvements		9,883.00
Accumulated Depreciation		(81,863.00)
Total Property and Equipment		174,412.02
 Other Assets		
Total Other Assets		0.00
Total Assets	\$	387,927.57

LIABILITIES AND EQUITY

Current Liabilities		
Income Taxes Payable	\$	45.00
Total Current Liabilities		45.00
 Long-Term Liabilities		
Total Long-Term Liabilities		0.00
Total Liabilities		45.00
 Equity		
Common Stock		14,573.00
Retained Earnings		376,494.57
Net Income		(3,185.00)
Total Equity		387,882.57
Total Liabilities & Equity	\$	387,927.57

See accountant's report

✓
Bridge Canyon Recreation Assn., Inc.
Statement of Revenues & Expenses
For the Twelve Months Ending December 31, 2004

	Year to Date		Year to Date	
Revenues				
Quad Run Income	1,338.49	10.24	1,338.49	10.24
Total Revenues	1,338.49	10.24	1,338.49	10.24
Cost of Sales				
Total Cost of Sales	0.00	0.00	0.00	0.00
Gross Profit	1,338.49	10.24	1,338.49	10.24
Expenses				
Contract Labor	1,500.00	11.47	1,500.00	11.47
Depreciation Expense	6,832.00	52.24	6,832.00	52.24
Insurance Expense	2,481.00	18.97	2,481.00	18.97
Legal and Professional Expense	472.00	3.61	472.00	3.61
Office Expense	318.42	2.43	318.42	2.43
Real Estate Taxes	594.00	4.54	594.00	4.54
Rent or Lease Expense	51.13	0.39	51.13	0.39
Repairs Expense	1,051.01	8.04	1,051.01	8.04
Operating Supplies	286.47	2.19	286.47	2.19
Clubhouse Propane	1,007.29	7.70	1,007.29	7.70
Clubhouse Water	163.50	1.25	163.50	1.25
Caretaker Propane	1,105.17	8.45	1,105.17	8.45
Caretaker Water	355.00	2.71	355.00	2.71
Total Expenses	16,216.99	124.01	16,216.99	124.01
Other Income				
Interest Income	9,786.59	74.84	9,786.59	74.84
Other Income	1,933.91	14.79	1,933.91	14.79
Gain/Loss on Sale of Assets	18.00	0.14	18.00	0.14
Total Other Income	11,738.50	89.76	11,738.50	89.76
Net Income before Income Taxes	(3,140.00)	(24.01)	(3,140.00)	(24.01)
Provision for Income Taxes				
State Income Tax Expense	(45.00)	(0.34)	(45.00)	(0.34)
Total Income Tax Expense	(45.00)	(0.34)	(45.00)	(0.34)
Net Income	\$ (3,185.00)	(24.36)	\$ (3,185.00)	(24.36)

See accountant's report

9. **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.

9A. **MEMBERS (A.R.S. § 10-11622.A.6)**

Only Nonprofit Corporations must answer this question.

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/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]

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, RECEIVERSHIP or CHARTER REVOCATION (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 ☐

NO ☒

B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR held or controlled over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any other corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?

[Underlined portion pertains to business corporations only]

One box **must** be marked:

YES ☐

NO ☒

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 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 Cheryl McMurray Date 3/28/05 Name _____ Date _____

Signature Cheryl McMurray Signature _____

Title Treasurer Title _____

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