



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

AZ Corp. Commission



01312730

DUE ON OR BEFORE 05/12/2005

FY04-05

FINANCIAL YEAR

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.

-0164598-5

FIRST SOUTHERN BAPTIST CHURCH OF PRESCOTT VALLEY
2820 PLEASANT VIEW DR
PRESCOTT VALLEY, AZ 86314

RECEIVED

MAY - 5 2005

AUG 23 2005

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: 928/772-7218

(Business phone optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2.

Statutory Agent: ~~F. BRIGGS~~ Dean Briggs Physical Address, if Different.

Mailing Address: ~~5700 E. EMERALD DR~~ 1841 N. Emerald Dr Physical Address:

City, State, Zip: ~~PRESCOTT VALLEY, AZ 86314~~ City, State, Zip:

Prescott, AZ 86301

NO \$ 08/29/05

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$10

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.

Dean Briggs

Signature of new Statutory Agent

Dean Briggs

Printed Name of new Statutory Agent

3.

Secondary Address:

1072169

(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 checked="" 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. **Please Print or Type Clearly.**

5a. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized**. -0164598-5

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

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)
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. **Please Type or Print Clearly.**

Name: N/A Name: _____

NONE ☐

Name: N/A Name: _____

7. OFFICERS Please Type or Print Clearly. You Must List at Least One.

Name: Jessie O. Sanders Name: _____

Title: Pastor Title: _____

Address: 9540 Magma Address: _____

Prescott Valley, AZ 86314 _____

Date taking office: 12/1/01 Date taking office: _____

Name: Barbara A. Cass Name: _____

Title: Secretary/Treasurer Title: _____

Address: 4861 N. Tonto Way Address: _____

Prescott Valley, AZ 86314 _____

Date taking office: 9/04 Date taking office: _____

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

Name: William L. Eash Name: _____

507 N. Vermilion Address: _____

Address: 12200 E. SR 69 #232 _____

Dewey, AZ 86327 _____

Date taking office: 5/14/03 Date taking office: _____

Name: Dean Briggs Name: _____

Address: 1841 N. Emerald Drive Address: _____

Prescott, AZ 86301 _____

Date taking office: 2/18/04 Date taking office: _____

Budget Report
1/1/05 Through 12/31/05

- 0164598-5

8/19/05

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Category Description	1/1/05 Actual	- Budget	12/31/05 Difference
EXPENSES			
100 MISSIONS			
110 COOP PROG	5,742.64	25,669.00	19,926.36
120 ASSOC. MIS	2,297.06	10,268.00	7,970.94
130 BENEVOLENCE	0.00	500.00	500.00
TOTAL 100 MISSIONS	8,039.70	36,437.00	28,397.30
200 EVANG-OR			
210 REVIVAL EXP	269.80	1,200.00	930.20
220 OUTREACH	87.46	1,000.00	912.54
221-BLOCK PARTY	1,000.62	900.00	-100.62
230 VBS	983.37	5,000.00	4,016.63
TOTAL 200 EVANG-OR	2,341.25	8,100.00	5,758.75
300 PROGRAMS			
310 SS LIT	4,013.29	5,000.00	986.71
311 WIN BBL STY	0.00	250.00	250.00
312 WRKS BQT	0.00	125.00	125.00
313 STMP.PTCARD	6.90	300.00	293.10
321 AWANA PROGRAM	132.29	1,250.00	1,117.71
330 BROTHERHOOD	71.47	250.00	178.53
331 SMALL GROUPS	0.00	1,200.00	1,200.00
332 SENIOR ADULT MINISTRY	0.00	200.00	200.00
340 W.E.M.	79.10	400.00	320.90
350 MUSIC LIT	345.92	1,000.00	654.08
351 INST REPAIR	0.00	250.00	250.00
352 MISC MUSIC	2.59	200.00	197.41
353 MUS SUPPLY	204.00	350.00	146.00
360 YOUTH MIN	165.40	1,750.00	1,584.60
370 PRESC MAT	0.00	500.00	500.00
380 CHILDREN MIN.	238.92	1,100.00	861.08
TOTAL 300 PROGRAMS	5,259.88	14,125.00	8,865.12
400 SUPPORT PRG			
410 LIBRARY-MED	0.00	150.00	150.00
411-CHILDREN'S LIBRARY	0.00	200.00	200.00
420 DEACON MIN	0.00	200.00	200.00
430 CONFER-TRNG	0.00	400.00	400.00
440 FLOWERS	27.14	600.00	572.86
450 FOOD SER	276.16	500.00	223.84
451 SPECIAL EVENTS	130.73	750.00	619.27
460 AUDIO-VIS	844.40	1,500.00	655.60
470 STEWARDSHIP	0.00	700.00	700.00
480 BAP-LORD SU	36.24	100.00	63.76
490 MISC. EXP	316.42	600.00	283.58
TOTAL 400 SUPPORT PRG	1,831.09	5,700.00	4,068.91
500 PROM-ADMIN			
510 OFFICE SUP	1,953.00	4,000.00	2,047.00
511 - INTERNET	399.36	480.00	80.64
520 ADVER-PUB	654.20	875.00	220.80
TOTAL 500 PROM-ADMIN	3,006.56	5,355.00	2,348.44
600 SALARIES			
610 PASTOR SAL	21,329.43	29,176.00	7,846.57
611 HOUSING	10,986.63	17,500.00	6,513.37
612 SOC SEC	2,142.24	3,550.00	1,407.76
620 MM.-CASH PAY	6,142.95	9,680.00	3,537.05
630 SECRETARY	13,530.00	21,320.00	7,790.00
640 CHILD CARE	0.00	9,984.00	9,984.00
TOTAL 600 SALARIES	54,131.25	91,210.00	37,078.75
700 PER SUPPORT			
710 PAST BUS EX	171.95	1,200.00	1,028.05
711 PAST ANNUIT	1,866.64	2,940.00	1,073.36
712 PAST INS	4,454.11	7,200.00	2,745.89
720 STAFF MLG	173.39	700.00	526.61

Budget Report
1/1/05 Through 12/31/05

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Category Description	1/1/05 Actual	- Budget	12/31/05 Difference
730 PULPIT SUP	50.00	400.00	350.00
740 CONV ALLOW	0.00	1,000.00	1,000.00
750 FICA	1,219.68	2,616.00	1,396.32
760 MEDICARE	285.17	594.00	308.83
770 WORK COMP	45.00	496.00	451.00
TOTAL 700 PER SUPPORT	8,265.94	17,146.00	8,880.06
800 BLDG-PROP			
805 MAINTENANCE	1,076.75	3,000.00	1,923.25
806-DUMPSTER	555.81	750.00	194.19
807-ADT	149.87	300.00	150.13
808 SANCTUARY SPRINKLER HEAD REP.	0.00	4,500.00	4,500.00
815 BLDG INS.	3,298.75	4,665.00	1,366.25
820 ELECTRICITY	3,906.28	6,850.00	2,943.72
825 HEATING	2,473.72	3,400.00	926.28
830 TELEPHONE	1,085.85	2,500.00	1,414.15
835 WATER.SWR.	1,400.67	1,900.00	499.33
840 NEW EQUIP	32.41	2,000.00	1,967.59
845 EQUIP LEASE	2,671.66	4,450.00	1,778.34
850 MISC. BLDG	17.53	1,000.00	982.47
855 CUSTODIAL	5,975.00	10,200.00	4,225.00
856 CUST SPLS	300.82	600.00	299.18
870 STOCKMEN'S BANK	20,069.36	32,504.00	12,434.64
TOTAL 800 BLDG-PROP	43,014.48	78,619.00	35,604.52
TOTAL EXPENSES	125,690.15	256,692.00	131,001.85
OVERALL TOTAL	-125,690.15	-256,692.00	131,001.85

Account Balances Report

(includes unrealized gains)

As of 7/31/05

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8/19/05

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Account	7/31/05 Balance
Bank Accounts	
BFA-EA BLDG FUND	3,000.62
BFA-EA PARKING LOT	2,764.12
STOCKMEN'S CHK'G	26,103.43
TOTAL Bank Accounts	31,868.17
Liability Accounts	
110D - COOPERATIVE PROGRAM	0.00
120D - ASSOCIATIONAL MISSIONS	0.00
170D AZ CHILD	0.00
220D - OUTREACH	-84.90
221D - VISITATION MINISTRIES	-417.28
230D - VACATION BIBLE SCHOOL	0.00
320D - DISCIPLESHIP TRAINING	-770.26
321D - AWANA	0.00
330D - BROTHERHOOD	-10.00
331D - SMALL GROUPS	57.57
340D - LADIES MINISTRIES	-180.35
352D - MISC. MUSIC MINISTRY.EQUIP.	-49.03
360D - YOUTH MINISTRIES	-284.55
361D - YOUTH ACCOUNTS	-48.51
370D - PRESCHOOL MINISTRIES	-246.20
380D CHILDREN'S MINISTRIES	-502.25
381D - KING'S KIDS CHOIR	-68.15
430D - CONFERENCE TRAINING	-602.14
440D - Flowers	-8.21
460D - AUDIO-VISUAL	-5.00
800D - MTNCE.CONSTRUCTION	0.00
801D - PARTITION DIVIDERS	-1,400.00
808D SPRINKLERS	-200.00
BENEVOLENC	-236.31
BFA REIMB.-PARKING LOT	-241.34
BUILDING FUND (NEW)	-5,333.62
BUS MAINTENANCE	-2,050.00
CHILDREN CAMP	-167.69
FACILITY USE	-100.00
FORTY DAYS	-649.57
HARVEST PARTY	0.00
HOLIDAY BASKETS	0.00
HOLIDAY TEA	-71.79
MISSION TRIP	-3,616.45
PARKING LOT	-3,865.62
PAYROLL- PASTOR SS	-599.92
PAYROLL-FICA	-2,837.00
PAYROLL-FWH	-26.00
PAYROLL-MED	-86.75
PAYROLL-PASTOR	-1,309.48
PAYROLL-SWH	-175.52
PEW BIBLES	-167.94
SENIOR SPECIAL OFFERINGS	0.00
STEEPLE FUND	-210.00
VISION FOR LDRSHIP	0.00
YOUTH CAMP FUND	-0.07
TOTAL Liability Accounts	-26,564.31
OVERALL TOTAL	5,303.86

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. -0164598-5

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 Barbara A. Cass

Date 5/3/05

Name _____

Date _____

Signature

Barbara A. Cass

Signature _____

Title Secretary/Treasurer

Title _____

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