



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

AZ Corp. Commission



01540930

DUE ON OR BEFORE 04/07/2006

FY05-06

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. -0711404-1
VERDE VALLEY HABITAT FOR HUMANITY, INC.
PO BOX 2515
COTTONWOOD, AZ 86326

RECEIVED

APR - 7 2006

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: (928) 649-6788 (Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Statutory Agent: KIRK R STETON
Mailing Address: 1371 SADDLEBACK DR
City, State, Zip: COTTONWOOD, AZ 86326

Physical Address, If Different.

Physical Address:

City, State, Zip:

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

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

- | | |
|---|--|
| <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 checked="" 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 type="checkbox"/> 16. Professional, commercial |
| <input type="checkbox"/> 17. 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**.

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)
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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: KAREN LYNN MADDY

Name: BARBARA ASHLEY

Title: EXECUTIVE DIRECTOR

Title: TREASURER

Address: P.O. Box 1270
CLARKDALE, AZ 86324

Address: 1415 Verde Valley School Rd.
Sedona, AZ 86351

Date taking office: JAN. 2004

Date taking office: JAN 2006

Name: ARNE STOLBERG

Name: _____

Title: VICE CHAIRMAN

Title: _____

Address: 2050 W. Hwy 89A #340
Cottonwood, AZ 86326

Address: _____

Date taking office: JAN 2003

Date taking office: _____

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

Name: KIRK STETSON

Name: _____

Address: 1371 SADDLEBACK Dr.
Cottonwood AZ 86326

Address: _____

Date taking office: November 2004

Date taking office: _____

Name: _____

Name: _____

Address: _____

Address: _____

Date taking office: _____

Date taking office: _____

8:38 PM

04/04/06

Accrual Basis

Verde Valley Habitat For Humanity, Inc

Balance Sheet

As of March 31, 2006

	Mar 31, 06
ASSETS	
Current Assets	
Checking/Savings	
1015 · Checking Accounts	
1016 · Wells Fargo Bank	11,996.51
1019 · Shop Grant Checking Account	1,739.13
Total 1015 · Checking Accounts	13,735.64
1040 · Investments-Temporary	
1041 · Wells Fargo Bank	22,857.72
1042 · Vanguard Group	87,018.30
Total 1040 · Investments-Temporary	109,874.02
Total Checking/Savings	123,609.66
Other Current Assets	
1230 · Current Portion of Mortgage Rec	5,842.32
1240 · Prepaid Expenses	
1241 · Prepaid Insurance	856.50
1242 · Prepaid-Others	38.00
1243 · Prepaid Evergreen Hardware	654.31
1244 · Prepaid Rent	200.00
Total 1240 · Prepaid Expenses	1,748.81
1245 · Refundable Deposits	1,000.00
1260 · Inventory-Land & Lots	
1251 · Lot 149 Lake Montezuma	15,024.93
Total 1260 · Inventory-Land & Lots	15,024.93
1300 · Construction In Process	6,333.50
Total Other Current Assets	29,949.56
Total Current Assets	153,559.22
Fixed Assets	
1420 · Storage Trail Used by Affiliate	3,000.00
1421 · Vehicles	4,500.00
1430 · Equipment & Furniture Major	3,887.99
1435 · Depreciation Equip. & Furn.	-2,336.00
Total Fixed Assets	8,851.99
Other Assets	
1610 · Mortgages Receivable	
1611 · Rodriguez	22,229.82
1612 · Heaney	22,788.26
1613 · Cortz	31,481.00
1614 · Abbey	37,912.94
1615 · Ralley	40,443.80
1616 · Burton	52,812.00
1617 · Kirton	55,808.45
1618 · Lookhart	64,904.55
1631 · Discount-Rodriguez	-7,080.94
1632 · Discount-Heaney	-9,828.96
1633 · Discount-Cortz	-12,100.96
1634 · Discount-Abbey	-14,706.44
1635 · Discount-Ralley	-16,393.12
1636 · Discount-Burton	-27,991.99
1637 · Discount-Kirton	-30,496.69
1638 · Discount-Lookhart	-31,810.92
1700 · Less Current Portion	-5,842.32
Total 1610 · Mortgages Receivable	172,128.48
Total Other Assets	172,128.48
TOTAL ASSETS	334,539.69

8:36 PM

04/04/06

Accrual Basis

Verde Valley Habitat For Humanity, Inc

Balance Sheet

As of March 31, 2006

	<u>Mar 31, 06</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
2010 · Accounts Payable	-1,386.83
Total Accounts Payable	-1,386.83
Other Current Liabilities	
2110 · Down Payment	800.00
Total Other Current Liabilities	800.00
Total Current Liabilities	-586.83
Long Term Liabilities	
2550 · Grants Payable	
2553 · Shop Grant #4	620.00
2554 · HFHI Shop Grant #5	1,200.00
2555 · HFHI Shop Grant #6	2,392.34
Total 2550 · Grants Payable	4,212.34
Total Long Term Liabilities	4,212.34
Total Liabilities	3,625.51
Equity	
3000 · Opening Bal Equity	237,531.44
3900 · Retained Earnings	50,241.80
Net Income	43,140.94
Total Equity	330,914.18
TOTAL LIABILITIES & EQUITY	<u><u>334,539.69</u></u>

8:39 PM

04/04/06

Accrual Basis

Verde Valley Habitat For Humanity, Inc

Profit & Loss

July 2005 through March 2006

	Jul '05 - Mar 06
Income	
4000 · Unrestricted Cash Contribution	
4010 · Contributions Individuals	17,908.84
4020 · Contributions Businesses	1,250.00
4030 · Contributions Churches	2,739.00
4050 · Club Donations	50.00
4080 · Scrip Income	393.00
Total 4000 · Unrestricted Cash Contribution	22,340.84
4089 · Restricted Income	
4060 · Grants-Other	16,545.61
Total 4089 · Restricted Income	16,545.61
4400 · Resale Store Income Net	
4410 · Resale Store Income Gross	859.11
4420 · Resale Store Cost	
4421 · Vehicle Expenses	-703.87
4422 · Storage Rental	-300.00
4424 · Supplies	-33.00
Total 4420 · Resale Store Cost	-1,036.87
Total 4400 · Resale Store Income Net	-177.76
4500 · Other Program Income	
4505 · Mortgage Discount Amortization	10,701.57
4515 · Late Fee Income	206.97
Total 4500 · Other Program Income	10,908.54
4600 · Other Non-Program Income	
4610 · Interest Income	983.27
Total 4600 · Other Non-Program Income	983.27
Total Income	50,600.50
Expense	
VOID	0.00
5100 · Construction Cost	
5101 · Inventory Write-off	0.00
5102 · Cost of Construction	432.72
5103 · Cost of Rework on House #6	2,414.00
5104 · Liability Insurance	1,170.68
Total 5100 · Construction Cost	4,017.40
5150 · Land & Acquisition Costs	
5156 · Land Cost	110.68
Total 5150 · Land & Acquisition Costs	110.68
5200 · Other Mission Specific Costs	
5214 · Mortgage Loan Service	307.50
5215 · Loan Service	12.90
Total 5200 · Other Mission Specific Costs	320.40
5220 · International Tithe Expense	303.96
5330 · Supplies	
5334 · Other Supplies	348.07
5330 · Supplies - Other	47.00
Total 5330 · Supplies	395.07
5370 · Equipment Costs	
5372 · Repairs	6.00
Total 5370 · Equipment Costs	6.00
5490 · Other Expenses	
5498 · Expenses-Other	16.00
Total 5490 · Other Expenses	16.00

8:39 PM
04/04/06
Accrual Basis

Verde Valley Habitat For Humanity, Inc
Profit & Loss
July 2005 through March 2006

	<u>Jul '05 - Mar 06</u>
7330 · Supply Expense	
7332 · Office Supplies	250.83
Total 7330 · Supply Expense	<u>250.83</u>
7340 · Telephone & Fax	491.50
7360 · Postage and Shipping	547.83
7380 · Printing & Publication	
7383 · Printing & Duplication	38.05
7384 · Newsletters	123.39
7386 · Advertising	131.60
Total 7380 · Printing & Publication	<u>293.04</u>
7411 · Management & General Bank Fees	25.00
7490 · Other Expense	
7494 · Expenses-Other	461.00
7490 · Other Expense - Other	70.85
Total 7490 · Other Expense	<u>531.85</u>
8000 · Fundraising	
8486 · Exhibit Booth	150.00
Total 8000 · Fundraising	<u>150.00</u>
Total Expense	<u>7,459.56</u>
Net Income	<u><u>43,140.94</u></u>

8:37 PM

04/04/06

Accrual Basis

Verde Valley Habitat For Humanity, Inc

Profit & Loss

March 2006

	<u>Mar 06</u>
Income	
4000 · Unrestricted Cash Contribution	
4010 · Contributions Individuals	265.00
4030 · Contributions Churches	60.00
Total 4000 · Unrestricted Cash Contribution	<u>315.00</u>
4400 · Resale Store Income Net	
4410 · Resale Store Income Gross	225.00
Total 4400 · Resale Store Income Net	<u>225.00</u>
4500 · Other Program Income	
4505 · Mortgage Discount Amortization	1,132.98
4515 · Late Fee Income	15.00
Total 4500 · Other Program Income	<u>1,147.98</u>
Total Income	<u>1,687.98</u>
Expense	
VOID	0.00
5100 · Construction Cost	
5102 · Cost of Construction	28.00
Total 5100 · Construction Cost	<u>28.00</u>
5220 · International Tithe Expense	0.00
5330 · Supplies	
5334 · Other Supplies	192.50
Total 5330 · Supplies	<u>192.50</u>
7340 · Telephone & Fax	46.67
Total Expense	<u>267.17</u>
Net Income	<u><u>1,420.81</u></u>

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (att sch) (cash \$ _____ non-cash \$ _____)	22			
23 Specific assistance to individuals (att sch)	23			
24 Benefits paid to or for members (att sch)	24			
25 Compensation of officers, directors, etc	25			
26 Other salaries and wages	26			
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32	500.	500.	
33 Supplies	33	351.	351.	
34 Telephone	34	814.		814.
35 Postage and shipping	35	709.		709.
36 Occupancy	36			
37 Equipment rental and maintenance	37	998.	998.	
38 Printing and publications	38	154.		154.
39 Travel	39	-65.		-65.
40 Conferences, conventions, and meetings	40			
41 Interest	41	163.	163.	
42 Depreciation, depletion, etc (attach schedule)	42	1,741.	1,741.	
43 Other expenses not covered above (itemize): a See Statement 3	43a	87,282.	86,598.	684.
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	92,647.	89,851.	2,796.

Joint Costs. Check ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service AccomplishmentsWhat is the organization's primary exempt purpose? ☐ See Statement 4

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) & (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)

a Completed construction Lookhart home (#8) and sold home to the family at no profit to the organization.	(Grants and allocations \$ 9,771.)	89,851.
b	(Grants and allocations \$ _____)	
c	(Grants and allocations \$ _____)	
d	(Grants and allocations \$ _____)	
e Other program services	(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		89,851.

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; |
| 4. Prior addresses (for immediate preceding 7 year period). | the date and location; the court and public agency involved, and the file or cause number of the case. |

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 Karen Lynn Maddy Date 04/3/06 Name _____ Date _____

Signature Karen Lynn Maddy Signature _____

Title Executive Director Title _____

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

Annual Report Instruction Sheet - READ ME! PLEASE FOLLOW THESE DIRECTIONS!

This is the instruction sheet for the annual reporting process for all corporations doing business in Arizona. Every corporation must submit an annual report once a year. This annual report must be correctly filled out and submitted by the assigned due date or the corporation may be administratively dissolved or have its authority revoked by the State of Arizona. This is the only notice you will receive. According to A.R.S. §10-1622.F, penalties accrue on business corporation annual reports which are submitted late (after the due date). Corporations must use the annual report form prescribed by the Corporation Commission. **No other format is allowed.**

Please verify the business address and statutory agent and agent address information on page one. Strike out incorrect information. Correct information should be legibly written above or to the side of struck, incorrect information. Complete the remainder of the form - use the corporation's original articles of incorporation, amendment documents and corporate minutes as guides for the stock questions. **IMPORTANT:** The entirety of this document is public record, including addresses cited. ***Use black or blue ink.**

- ☐ **Section 1.** All corporations must state their name, address, zip code, domicile state, and type (e.g., nonprofit, business, sole, professional, business trust). Please list a business phone number.
- ☐ **Section 2.** All corporations must state the name and address of the current Statutory Agent for the corporation. Correct information about the Statutory Agent is vital to the legitimate authority and status of the corporation. The statutory agent must provide both a physical and mailing address. If statutory agent has a P.O. Box, then they must provide a physical description of their street address/location. New Statutory Agents must consent to their appointment by signing the appropriate line. A corporation must amend their records at the Commission anytime the Statutory Agent is changed or whenever the Agent's designated mailing address changes. Do not sign in the space provided, unless you are appointing a new agent.
- ☐ **Section 3.** Foreign (out-of-state/country) corporations must state their known place of business in this state and in the jurisdiction in which they are incorporated. List the primary address in Section 1, and the secondary address in Section 3.
- ☐ **Section 4.** All corporations must check the category that best describes the character of their corporation in the applicable business or nonprofit corporation area.
- ☐ **Section 5.** All business corporations must indicate the number of shares which they have authorized and issued, the class and series. All business trusts must indicate the number of transferable certificates held by trustees.
- ☐ **Section 6.** All business corporations must indicate the list of applicable shareholders.
- ☐ **Section 7.** Please list all principal officers. All corporations must have at least one duly authorized officer, with address.
- ☐ **Section 8.** Please list all directors. All corporations must have at least one director per A.R.S. §§10-803.A & 10-3803.A.
- ☐ **Section 9.** All Nonprofit corporations must file a financial disclosure statement. Nonprofit corporations meet their obligation by attaching one of the following documents: 1) Their most recent copy of Page 2, Form 99 filed with the Arizona Department of Revenue; OR 2) A copy of the corporation's Charitable Organization Financial Statement as filed with the Arizona Secretary of State pursuant to A.R.S. §44-6552; OR 3) A copy of the corporation's Treasurer's Report/Financial Statement prepared for the current fiscal year; OR 4) A copy of the financial statement prepared for the corporation's members; OR 5) A statement that the corporation conducted no business in Arizona in the past year. All other types of corporations are exempt from filing a financial disclosure. All Nonprofit Corporations must also indicate whether or not the corporation has members.
- ☐ **Section 10.** All corporations must check either YES or NO in the Certificate of Disclosure. Those who check the "YES" box must supply the attachment required as explained in section 10.
- ☐ **Section 11.** All corporations must check either YES or NO in the Statement of Bankruptcy, Receivership or Charter Revocation (both A and B). Those who check the "YES" box must supply the attachment required as explained in section 11.
- ☐ **Section 12.** All corporations must read the declarations in this section. If they have complied, and if they have completed the Annual Report, then the applicable officer(s) listed in section 7 must acknowledge by signing and dating the report. The signer(s) shall be at least one duly authorized officer.
- ☐ **Sign, Date & Mail the Check and Annual Report.** Business corporations must send \$45, Nonprofit corporations \$10. Credit cards are not accepted. Business/profit corporations are subject to penalties if their report is submitted after its assigned due date. Contact the Annual Report section at 602-542-3285 (Phoenix) or 520-628-6560 (Tucson) or by FAX at 602-542-0082 for the penalty amount due.

MAKE CHECK PAYABLE TO:
MAIL OR DELIVER TO:

ARIZONA CORPORATION COMMISSION
c/o Annual Reports - Corporations Division
1300 West Washington
Phoenix, AZ 85007-2929

Seek professional advice from your accountant, attorney, or other knowledgeable source if you need help with any section. The Commission's web site (www.cc.state.az.us) has more general information about annual reports and reporting requirements. The Annual Reports Section of the Corporations Division cannot give legal or tax advice, but you may call them with your other questions regarding this form at (602) 542-3285.