

WEB FORM COPY

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





DUE ON OR BEFORE

04/11/2007

FY06-07

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.	-0123263-5 RIO VERDE SADDL % J OHN WILLIAMS			
	% IOHN WILLIAMS	E CLUB, INC.		MAR 2 9 2007
		ON PETER O	Reilly	MARK & V ZUUT
	18551 POCO VISTA RIO VERDE, AZ 852	25 C 37 N Rio Ven	REILLY LEL CORFEZ DRIVE DE, AZ 85263	ARIZONA CORP. COMMISSION CORPORATIONS DIVISION
	Business Phone:_	(Business	phone is optional.)	
	State of Domicile: A	RIZONA Type of Co	prporation: NON-PROFIT	
2.	Statutory Agent: E-R	OBERT KERN	Physical Address, If Different.	John Handing 5 E. Mouminaine Da. ENDE, A285263
	Mailing Address: 258	49 N BODERO BEND	Physical Address: 1881	5 E. MOUMINAILE DA
	City, State, Zip: RIC	VERDE, AZ 85263	City, State, Zip:	
			1100	EXIE AL83263
Г		Use this box on	ly if appointing a new St.	
	ACC USE ONLY			
	Fee \$		utory agent, the new agent MUST cor	nsent to that
		appointment by signing	below.	
	Penalty \$	I, (individual) or We, (corporation	or limited liability company) having been design	aled the new Statutory Agent,
1	Reinstate \$	do heraby contrant to this appoi	timent until my removal or resignation pursuant to	⊅ MW.
	Expedite \$	July 1	Marilly	
	Resubmit \$		f new Stallutory Agent	
L	Lieschnist A	: -:	VHMOING	
		Printed Nar	me of <i>new</i> Statutory Agent	
3. 8	Secondary Address:			
	(Foreign Corporations			
	REQUIRED to comp	lete		
	this section).			
	:			
4.	Check the one category to	below which best describes the	e CHARACTER OF BUSINESS of yo NON-PROFIT CORP	ur corporation.
	BUSINESS CORP	OHATIONS20. Menufacturing	1 Charitable	OHATIONS
	_ 2. Advertising	. 21. Mining 22. News Media	2 Benevolent 3 Educational	
		23. Pharmaceutical	4 Civic	
	5. Architecture 6. Banking/Finance	24. Publishing/Printing _25. Ranching/Livestock	5 Political 6 Religious	

8. Construction Literary 27. Restaurant/Ber 9. Contractor 28. Retail Sales Cultural _ 10. Credit/Collection Athletic .29. Science/Res ם .0י __ 11. Education __ 12. Engineering Salarco/Rascarch 20. Sports/Sporting Events 12 Hospital/Health Care 31. Technology(Computers) 13. __ Agricultural 13. Entertainment 32. Technology(Ceneral) 33. Television/Radio 14. _ Animal Husbandry 14. General Consulting 15. __ Homeowner's Association 15. Health Care 34. Tourism/Convention Services Professional, commercial _ 16. Hotel/Motel 35. Transportation 6. _ -7 × Other HORSE RIDING CLB 17. import/Export 26. Ulilities .37. Veterinary Medicine/Animal Care _ 18. Insurance _ 19. Legal Services .38. Other .

 CAPITALIZATION: (Business Corporations and Business True) 	usts are <u>REQUIRED</u> to complete this section.)
Business trusts must indicate the number of transferable certifies trust estate. Dr. E. G.E. DD INTE OD TYPE CLEAR IN	icates 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 In	corporation for the amount of shares authorized.
	•
Number of Shares/Certificates Authorized 17 Class	REGULAR Series Within Class (if any)
corporation's minutes for the number of shares issued	2
Number of Shares/Certificates Issued 14 Class	REGULAN Series Within Class (if any)
6. SHAREHOLDERS: (Business Corporations and Business T	
List shareholders holding more than 20% of any class of shabeneficial interest in the corporation. PLEASE PRINT OR T	TYPE CLEARLY.
Name:	Name:
NONE	Name:
7. OFFICERS PLEASE PRINT OR TYPE CLEARLY. Y	OU MUST LIST AT LEAST ONE.
Name: TUHN HARDING	Name: CANEL RECEY
Title: PRESIDENT	Title: SECRETARY
Address: 18815E. Mountain Agre Dr.	Address: 18526 AM ANADO CIRCLE
Rio Venne Az 85263	Jour Vense Az 85263
Date taking office: April 4 2006	Date taking office: Phil 4 2002
Name: GAIL SUVINER Title: VICE - PRESIDENT	Name: #57520 Reilly
Title: Vice - PRESIDENT	Title: Theasmen
Address: 18702 E-GENVILL Dr.	Address: 25637NELCONERDE
Rio VENNE AZ 85263	Rio VENSE, AZ 85263
Date taking office: April 8, 2006	Date taking office: April 4 Local
8. DIRECTORS PLEASE PRINT OR TYPE CLEARLY.	YOU MUST LIST AT LEAST ONE.
Name: John Williamson	Name:
Address: 18551 Poco VISTA	Address:
. RUVERNE, 1285263	
Date taking office: Ceprily real	Date taking office:
Name:	Name:
Address:	Address:
Date taking office:	Date taking office:

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Rio Verde Saddle Club - Net Worth - As of 3/11/2007:2 As of 3/11/2007

3/11/2007

<u></u>	3/11/2007 Balance		
ASSETS			<u> </u>
Cash an	d Bank Accounts		
Chase	Bank- RV Saddle Club		14,532.06
TOTA	L Cash and Bank Accounts		14,532.06
TOTAL	ASSETS		14,532.06
LIABILITIE	S		0.00
OVERALL	TOTAL		14,532.06

3/11/2007

Income/Expense 4/1/2006 through 3/11/2007 (Accrual Basis)

Category Description	4/1/2006- 3/11/2007
INCOME	
Associate Membership Fee	4,400.00
Feed Assessment Income	10,659.11
Guest Stall Rental	110.00
Merchandise Sales	510.00
Operating Assessment Income	8,277.06
Other Assessment Stall Rental	322.00
TOTAL INCOME	24,278.17
EXPENSES	
Bank Charge	4.00
Computer	97.14
Feed Expenses	6,021.99
Gasoline	481.29
Gifts Given	200.00
Guest Stall Rental Expense	40.00
Insurance	360.00
Labor	155.00
Merchandise	731.27
Mileage	45.83
Misc	-33.01
Monthly Maintenance	1,800.00
Outside Labor	135.00
Outside Pens	2,397.07
Supplies	1,356.93
Utilities	861.07
TOTAL EXPENSES	14,653.58
OVERALL TOTAL	9,624.59

Please Enter Corporation Name: RIO VERDE SADDLE CLUB, INC.	File number	-0123263-5 Page 3				
 FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9) Nonprofit corporations <u>must attach</u> a financial statement (e.g. income/expense state forms of corporations are exempt from filling a financial disclosure. 	ement, balance sheet includin	g assets, liabilities). All other				
9A. MEMBERS (A.R.S. § 10-11622.A.6) Only Nonprofit Corporations must answer this question. This corporation	n DOES/X DOES N	OT have members.				
10. <u>CERTIFICATE OF DISCLOSURE</u> (A.R.S. §§10-1622.A.8 & 10-11622 Has ANY person serving either by election or appointment as an officer, director, trus than 10% of the issued and outstanding common shares or 10% of any other propri been: [Underlined portion pertains to business corporations only]	tee, incorporator and/or persi	on controlling or holding more hip interest in the corporation				
 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 						
if "YES", the following information must be submitted as an attachment of the actions stated in Items 1. through 3. above.						
 Full birth name. Present home address. Prior addresses (for immediate Social Sectors. The nature the date and the date and the date and the date and the date. 	ocation of birth, urity Number and description of each conv d location; the court and publicause number of the case.					
11. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER RE 1623 & 10-11623)	VOCATION (A.R.S. §§10	202.D.2, 10-3202.D.2, 10-				
A) Has the corporation filed a petition for bankruptcy or appointed a receiver?	ne box <u>must</u> be marked:	YES INO A				
B) Has any person serving as an officer, director, trustee or incorporator of the corpover 20% of the issued and outstanding common shares, or 20% of any other perporation which has been placed in bankruptcy, receivership or had its charter reverse or jurisdiction?	poration served in any such c proprietary, beneficial or men	apacity OR held or controlled bership interest in any other dicially dissolved by any state				
-	one box <u>must</u> be marked:	YES D 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. 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. 						
12. SIGNATURES: Annual Reports must be signed and dated by at least	one duly authorized office	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 / BTEN Re-M Date 3/W/07 Name		Date				
Signature Signature Signature		There is a second of the secon				
Title Title (Signator(s) must be duly authorized corporate officer(s)) listed in section 7 of this	report.)				