

___ 8. Construction

___ 10. Ĉredit/Collection

__ 9. Contractor

___11. Education

__ 12, Engineering

__ 15. Health Care

__ 16. Hotel/Motel

__ 18. Insurance

__ 17. import/Export

__ 19. Legal Services

__ 13. Entertainment

__ 14. General Consulting

___ 27. Restaurant/Bar

__ 29. Science/Research

__30. Sports/Sporting Events

__32. Technology(General)

__33. Television/Radio

__35. Transportation

__36. Utilities

__ 38. Other

__31. Technology(Computers)

__34. Tourism/Convention Services

__ 37. Veterinary Medicine/Animal Care

__ 28. Retail Sales

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

DUE ON OR BEFORE 04/26/2007

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 The Commission's authority to prescribe this form is A.R.S. §§10-121.A. & 10-3121.A. Statutes. Title 10. 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. -0505436-8 WOODIN LABORATORY % ADVISORY SERVICES INC. 1422 EUCLID AVE CLEVELAND, OH 44115-2078

RECEIVED APR. 2 6 2007

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

	Business Phone:	(Busine	ess phone is optional.)
	State of Domicile: A	RIZONA Type of	Corporation: NON-PROFIT
2.	Statutory Agent: WILL	IAM H WOODIN	Physical Address, If Different.
	Mailing Address: 3600	N LARREA LN	Physical Address:
	City, State, Zip: TUCS		City, State, Zip:
	City, state, Zip: Tucs	JN, RZ 65750	City, State, Mip:
		Use this box	only if appointing a new Statutory Agent
	ACC USE ONLY	· · · · · · · · · · · · · · · · · · ·	
	ADD DOE ONE!		
	Fee \$	If appointing a <u>new</u> s	tatutory agent, the new agent MUST consent to that
		appointment by signification	ng below.
	Penalty \$		
			ntion or limited liability company) having been designated the new Statutory Agent,
	Reinstate \$	do hereby consent to this ap	pointment until my removal or resignation pursuant to law.
	Expedite \$	Sinnatu	re of new Statutory Agent
		Signatur	e of new Statutory Agent
	Resubmit \$		
		Printed	Name of new Statutory Agent
_			- Carlott Gallato, Figure
3.	Secondary Address:		
			•
	(Foreign Corporations	are	
	REQUIRED to comple	ete e	
	this section).	i	
-		-	
			Y.
4.	Check the one category be	elow which best describes	the CHARACTER OF BUSINESS of your corporation.
••	BUSINESS CORPO		NON-PROFIT CORPORATIONS
	1 Accounting	20 Monufacturing	1 Charitable
	2. Advertising	21. Mining	2. Benevolent
	2. Advertising 2. Advertising 3. Aerospace 4. Agriculture 5. Architecture 6. Banking/Finance	22. News Media	3 Educational
	4. Agriculture	23. Pharmaceutical 24. Publishing/Printing	4 Civic 5 Political
	6 Banking/Finance	24. Publishing/Finning 25. Ranching/Livestock	5 Political 6 Religious
	7. Barbers/Cosmetology	76 Hoal Fetato	7 Social

__ Literary

13. __ Agricultural

17. __ Other_

Athletic 11. X Science/Research

12. __ Hospital/Health Care

15. _ Homeowner's Association

Professional, commercial

industrial or trade association

14. _ Animal Husbandry

9. __ Cultural

10.

16.

-0505436-8 WOODIN LABORATORY	Page 2
5. CAPITALIZATION: (Business Corporations and Bus	
Business trusts must indicate the number of transfera the trust estate. Please Print or Type Cle	able certificates held by trustees evidencing their beneficial interest in early.
5a. Please examine the corporation's original Artic	cles 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 deter corporation's minutes for the number of share	rmine if the original number of shares has changed. Examine the es issued.
Number of Shares/Certificates Issued	Class Series Within Class (if any)
	usiness Trusts are REQUIRED to complete this section.)
beneficial interest in the corporation. Please Type	ss of shares issued by the corporation, or having more than a 20% or Print Clearly.
Name:	
NONE 🗇	
Name:	Name:
7. OFFICERS Please Type or Print Clea	rly. You Must List at Least One.
Name: William H. Woodin	Name: Frank W. Hackley
Title: President/CEO	Title: Secretary
Address: 3600 N. Larrea Lane	Address: 730 Thrasher Way
Tucson, AZ 85750	Anaheim, CA 92807
Date taking office: 4/29/93	Date taking office: 4/29/93
Name:Elizabeth T. Woodin	Name:
Title:	Title:
Address: 3600 N. Larrea Lane	Address:
Tucson, AZ 85750	
Date taking office: 4/29/93	Date taking office:
8. DIRECTORS Please Type or Print Clea	arly. You Must List at Least One.
Name: William H. Woodin	Name: Elizabeth T. Woodin
Address: 3600 N. Larrea Lane	Address: 3600 N. Larrea Lane
Tucson, AZ 85750	Tucson, AZ 85750
Date taking office: 4/29/93	Date taking office: 4/29/93
Name: Frank W. Hackley	Name: Eugene L. Scranton

730 Thrasher Way

Date taking office: 4/29/93

Anaheim, CA 92807

Address: _

#73, Dakota Canyon Apartment Homes
Address: 6201 E. Pima Street

Tucson, AZ 85712

Date taking office: 4/29/93

WOODIN LABORATORY

ANNUAL REPORT ARS 10-125 AND

CERTIFICATE OF DISCLOSURE ARS 10-128

2006

PART C - STATEMENT OF THE CHARACTER OF BUSINESS IN WHICH THE CORPORATION IS ACTUALLY ENGAGED IN ARIZONA

Engaged in charitable, educational, and scientific activities regarding ballistics research to:

- (a) Expand knowledge of military and police ammunition through testing and assembling information;
- (b) Establish a facility containing ammunition collection and writings on the subject open to military, law enforcement, academic persons, and qualified general public;
- (c) Consultation, research, and testing facilities for military and law enforcement agencies.

WOODIN LABORATORY

Statement of Financial Condition As of December 31, 2006

ASSETS

Income Portfolio RMA Money Market Portfolio-Income		51.70
Principal Portfolio		
National City Bank Checking Account-Principal	62.83	
RMA Money Market Portfolio-Principal	3,335.54	
Mutual Funds	147,518.17	
		150,916.54
Equipment		
Computer and Accessories	780.00	
Less Accrued Depreciation	(610.00)	
		170.00
Jane's Ammunition Handbook	350.00	
Less Accrued Depreciation	(350.00)	•
·		0.00
Pressure Tank & Fittings	723.00	
Less Accrued Depreciation	(540.00)	
		183.00
Air Conditioner	2,852.00	
Less Accrued Depreciation	(2,021.00)	001.00
	242.00	831.00
Digital Camera	842.00	
Less Accrued Depreciation	(806.00)	36.00
	000.00	30.00
HP 210 Copier	920.00	
Less Accumulated Depreciation	(920.00)	0.00
		0.00
TOTAL ASSETS		152,188.24

WOODIN LABORATORY

Statement of Financial Condition As of December 31, 2006

LIABILITIES AND CAPITAL

Liabilities		
W.H. Woodin, III		1,834.14
Income		
Stock Dividends	523.39	
Mutual Funds Dividends	2,079.14	
Money Market Dividends	132.65	
Checking Account Interest	11.82	
Office Expense	(3,000.00)	
Utilities	(4,988.82)	
Dues & Subscriptions	(383.97)	
Repair & Maintenance	(1,860.18)	
Legal Expense	(172.60)	
State Registration Fee	(10.00)	
Depreciation Expense	(588.00)	
UBS Financial Services, Inc Fee	(526.49)	
Current Year Federal Excise Tax Estimates	(1,000.00)	
Fiduciary Liability Insurance	(173.00)	
Net Income to Date		(9,956.06)
Principal		
Capital Balance as of 01/01/2006	85,969.70	
William H. Woodin, III Contributions	500.00	
Profit/(Loss) on Sale of Securities	<u>73,840.46</u>	
		160,310.16
TOTAL LIABILITIES AND CAPITAL		152.188.24

ADVISORY SERVICES, INC.

1010 Hanna Building, 1422 Euclid Avenue Cleveland, Ohio 44115-2078

> (216) 696-0320 FAX: (216) 363-6488

April 23, 2007

Arizona Corporation Commission c/o Annual Reports – Corporations Division 1300 West Washington Phoenix, AZ 85007-2929

RE: Woodin Laboratory - Corporation File #0505436-8

Dear Sirs:

Enclosed are the Annual Report ARS 10-125 and Certificate of Disclosure ARA 10-128 for Woodin Laboratory as well as the annual corporation fee of \$10.00 (check #1315).

Would you please acknowledge receipt of the above by signing the enclosed copy of this letter, and returning it to me in the provided envelope.

Sincerely,
Nath Valuette

Nick Valentino President

NV/pp

Enclosures

ce: William H. Woodin Fennemore Craig

ADVISORY SERVICES, INC.

1010 Hanna Building, 1422 Euclid Avenue Cleveland, Ohio 44115-2078

> (216) 696-0320 FAX: (216) 363-6488

April 23, 2007

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Sincerely,

Nick Valentino President

NV/pp

Enclosures

cc: William H. Woodin Fennemore Craig We hereby acknowledge receipt of the above described enclosures:

By:

Date: _____

Please Enter Corporation Name:	<u> </u>	File numb	er Page 3
9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A. Nonprofit corporations <u>must attach</u> a financial statement (efforms of corporations are exempt from filing a financial dis	e.g. income/expe	nse statement, balance sheet includ	
9A. <u>MEMBERS</u> (A.R.S. § 10-11622.A.6)			
Only Nonprofit Corporations must answer this question.	This co	rporation DOES DOES	NOT 🖾 have members.
10 CERTIFICATE OF DISCLOSURE /A D.S. 8810	, 1630 V 0 6 10	11600 A 7\	
 CERTIFICATE OF DISCLOSURE (A.R.S. §§10- Has ANY person serving either by election or appointment a 	s an officer, direc	ctor, trustee, incorporator and/or per	son controlling or holding more
than 10% of the issued and outstanding common shares or been: [Underlined portion pertains to business corporations to business corporations are supported by the common shares or portion pertains to business corporations are supported by the common shares or portions are supported by the common shares or portions are supported by the common shares or portions are supported by the common shares or provided by the common shares	r 10% of any oth	er proprietary, beneficial or member	rship interest in the corporation
 Convicted of a felony involving a transaction in securi year period immediately preceding the execution of the Convicted of a felony, the essential elements of which or monopoly in any state or federal jurisdiction withing. Or are subject to an injunction, judgment, decree or immediately preceding execution of this certificate which is consumer fraud laws of that jurisdiction, (c) the antitrust or restraint of trade laws of that 	this certificate? In consisted of fra In the seven year permanent order here such injunct ies laws of that j or	ud, misrepresentation, theft by false period immediately preceding exec of any state or federal court entere ion, judgment, decree or permanent	e pretenses or restraint of trade cution of this certificate? ed within the seven year period
		One box <u>must</u> be marked:	YES 🗖 NO 🖾 j
If "YES", the following information must be submit of the actions stated in Items 1. through 3. above.	<u>ítted</u> as an atta	chment to this report for each pe	erson subject to one or more
Full name and prior names used.		e and location of birth.	
 Full birth name. Present home address. Prior addresses (for immediate preceding 7 year period). 	7. The the	cial Security Number enature and description of each con date and location; the court and pub file or cause number of the case.	viction or judicial action; blic agency involved, and
11. STATEMENT OF BANKRUPTCY, RECEIVERS	IIP or CHART	FR REVOCATION (A.R.S. 881)	1.202 D 2 10.2202 D 2 10.
1623 & 10-11623)	III OI OIIAIII	<u> </u>	, EOZ.D.2, 10-3202.D.2, 10-
A) Has the corporation filed a petition for bankruptcy or app	pointed a receive	er? One box <u>must</u> be marked:	YES 🗇 NO 🖾
B) Has any person serving as an officer, director, trustee or	r incorporator of	the corporation served in any such	capacity OR <u>held or controlled</u>
over 20% of the issued and outstanding common shares corporation which has been placed in bankruptcy, receiversh	, or 20% or any hip or had its cha	other proprietary, beneficial or me rter revoked, or administratively or i	mbersnip interest in any other udicially dissolved by any state
or jurisdiction?			· _ ·
[Underlined portion pertains to business corporations	only]	One box <u>must</u> be marked:	YES I NO 🗵
If "YES" to A and/or B, the following information mustatement above. 1. The names and addresses of each corporation stockholder) 2. The state in which each corporation was a) income	n and the perso	n or persons involved. (e.g. office	<u> </u>
The dates of corporate operation.			
 If any involved person (listed in #1) has been in address of each corporation. 	volved in any of	ther bankruptcy proceeding within t	the past year, the name and
Date, Case number and Court where the bankru	ptcy was filed or	receiver appointed.	
6. Name and address of court appointed receiver.			
10 CICHATUREC Annual Providence			
12. SIGNATURES: Annual Reports must be signed a			
declare, under penalty of law that all corporate incom filed with the Arizona Department of Revenue. I furthe certificate, including any attachments, and to the best	er declare under	penalty of law that I (we) have e	xamined this report and the
Name William H. woodinDate Apr	<u>१,00</u> 7 Name_	Frank W. Hackley	Date 2 p1. 11, 2007
Signature William Woodn	Signatu	Frank W. Hackley	len
Title President	Title	Secretary	(
(Signator(s) must be duly authorize			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.

OIL	nue 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.
7	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 of 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
IJ	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/Financia 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 no the corporation has members.
	Section 10. <u>All</u> 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 Charte Revocation (both A and B). Those who check the "YES" box must supply the attachment required as explained in section 11.
	Section 12. <u>All</u> 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 <u>must</u> 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.

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.

AR:0046

ARIZONA CORPORATION COMMISSION

c/o Annual Reports - Corporations Division

1300 West Washington Phoenix, AZ 85007-2929

Rev. 05/2005

MAKE CHECK PAYABLE TO:

MAIL OR DELIVER TO: