



WEB FORM COPY

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





DUE ON OR BEFORE 10/21/2007

FY07-08

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 the current status of the corporation. See instructions on page 4 for proper format.

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> NORTHERN ARIZONA COUNCIL OF GOVERNMENTS (NACOG) % KENNETH SWEET 119 E ASPEN AVE FLAGSTAFF, AZ 86001-5222

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

* DELINQUENT ANNUAL REPORT 01/30/2008	3; CONTACT THE COMMISSION AT 602-542-3285!
Business Phone:	(Business phone is optional.)
State of Domicile: ARIZONA	ype of Corporation: NON-PROFIT

Statutory Agent: WILLIAM B HURST 2. Mailing Address: 821 RIORDAN RD

City, State, Zip: FLAGSTAFF, AZ 86001

Physical Address, If Different. Physical Address: City, State, Zip:

ACC	USE ONLY
Fee	\$
Penalty	\$
Reinstate	9 \$
Expedite	\$
Resubmi	it \$

Use	this	box	only	i£	appointing	а	П е W	Statutory	Agent

If appointing a <u>new</u> 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 Age do hereby consent to this appointment until my removal or resignation pursuant to law.	nt,
Signature of new Statutory Agent	

Secondary Address:

(Foreign Corporations are **REQUIRED** to complete this section).

Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

Printed Name of new Statutory Agent

BUSINESS CORPO	RATIO	<u>INS</u>
1. Accounting	<u>r</u> 20.	Manufacturing
2. Advertising	<u></u>	Mining
3. Aerospace	<u>1</u> 22.	News Media
👊 4. Agric.Jhure	E 23.	Pharmaceutical
5. Architecture	[3] 24 .	Publishing/Printing
🏗 6. Banking/Finance	<u>r</u> 25.	Hanching/Livestock
7. Barbers/Cosmetology	26.	Heal Estate
🕮 8. Construction	27.	Hestaurant/Har
3. Contractor	g:::) 28.	Hetail Sales
≥ 10. Credit/Collection	2 9.	Science/Research
్ట్ 11. Education	3 0.	Sports/Sporting Events
🚎 12. Engineering	# #31.	Technology(Computers)
📆 13. Entertainment	232 .	Technology(General)
📆 14. General Consulting	233.	Television/Radio
15. Health Care	**** 34 .	Tourism/Convention Services
iii 16. Hotel/Motel	235 .	Transportation
17. lm:port/Export	36 .	Utilities
🗠 18. Insurance	37.	Veterinary Medicine/Animal Care
** 10 Lucul Services	3B	Other

NON-PROFIT CORPORATION
1. 🕽 Charitable
2. C Genevolent
3. a Fducational
4. Civic
5. Political
6. 🚎 Heligious
7. Social
8. Literary
9. Cultural
10 Athletic
11. Science/Research
12. Hospital/Health Care
13. Agricultural
14. Animai Husbandry
15. Homeowner's Association
16. Professional, commercial
industrial or trade associatio
17 W Othor

Date taking office:

5. CAPITALIZATION: (Business Corporations and Busines	s Trusts are <u>REQUIRED</u> to complete this section.)
Business trusts must indicate the number of transferable of the trust estate. PLEASE PRINT OR TYPE CLEARLY.	ertificates held by trustees evidencing their beneficial interest in
5a. Please examine the corporation's original Articles	of Incorporation for the amount of shares authorized.
Number of Shares/Certificates Authorized C	lass Series Within Class (if any)
7	e if the original number of shares has changed. Examine the sued.
Number of Shares/Certificates Issued C	lass Series Within Class (if any)
6. SHAREHOLDERS: (Business Corporations and Business	ess Trusts are REQUIRED to complete this section.)
List shareholders holding more than 20% of any class of beneficial interest in the corporation.	shares issued by the corporation, or having more than a 20%
Name:	Name:
NONE Name:	Name:
7. OFFICERS PLEASE TYPE OR PRINT CLEARL	
Name: Tom White, Jr.	_ Name: J.R. De Spain
Title: Regional Council Chairman	Title: Regional Council Vice-Chairman
Address: P.O. Box 1170	Address: <u>P.O. Box 159</u>
Ft. Defrance, AZ 86504	Joseph City, AZ 86032
Date taking office: 7/1/07	Date taking office: 7/1/07
Name: Matt Ryan	
THE Regional Council Immediate Past Ch	u Title:
Address: 219 E. Cherry Ave.	
Flagshff, AZ 86001	
Date taking office: 7/1/07	Date taking office:
8. DIRECTORS PLEASE TYPE OR PRINT CLEAF	RLY. YOU MUST LIST AT LEAST ONE.
Name: See attached list of Regional	Name:
Address: Cauncil members	Address:
Date taking office: All took office on or	Date taking office:
Name:	Name:
Address:	
	<u> </u>

Date taking office: _____

ROBERT ADAMS
UNISOURCE ENERGY
1480 N 16TH ST
SHOW LOW AZ 85901-

ALLAN AFFELDT MAYOR CITY OF WINSLOW 21 WILLIAMSON AVENUE WINSLOW AZ 86047TERRY ANDREWS P.O. BOX 2893 PAGE AZ 86040-

KERRY BALLARD VICE MAYOR TOWN OF SNOWFLAKE Box 482 SNOWFLAKE AZ 85937JOHN BOB BOUWMAN MAYOR TOWN OF JEROME BOX 335 JEROME AZ 86331-0335 DAVID BROWN SUPVR APACHE CTY BOS DIST #3 P O BOX 428 ST JOHNS AZ 85936-

JACK BROWN AZ SENATE 1700 W Washington PHOENIX AZ 85007JOHN COLE MAYOR TOWN OF TAYLOR P.O. BOX 461 TAYLOR AZ 85939-0461 PAUL COLEMAN DIR BUS SVCS UNISOURCE ENERGY 2901 W. SHAMRELL BLVD FLAGSTAFF AZ 86001-

PUD COLQUITT MAYOR CITY OF SEDONA 102 ROADRUNNER DRIVE SEDONA AZ 86336CHIP DAVIS SUPERVISOR YAVAPAI COUNTY 10 S. 6TH ST. COTTONWOOD AZ 86326PERCY DEAL SUPVR NAVAJO COUNTY PO BOX 365 ORAIBI AZ 86039-

J.R. DeSPAIN SUPVR NAVAJO COUNTY PO BOX 159 JOSEPH CITY AZ 86032-0159 JOE DONALDSON MAYOR CITY OF FLAGSTAFF 211 WEST ASPEN AVENUE. FLAGSTAFF AZ 86001-5399 KAY DYSON MAYOR TOWN OF SPRINGERVILLE 418 E. MAIN ST. SPRINGERVILLE AZ 85938-

KENNETH EDES MAYOR CITY OF WILLIAMS 113 SOUTH FIRST ST WILLIAMS AZ 86046GARY FINCH COUNCILMAN TOWN OF EAGAR P O BOX 1300 EAGAR AZ 85925NORMA GARRISON COUNCILMEMBER TOWN OF CAMP VERDE P.O. BOX 1753 CAMP VERDE AZ 86322-

TOM HANSEN APACHE COUNTY P O BOX 457 ST JOHNS AZ 85936CHARLIE HENDRICKSON AZ PUBLIC SVC 741 S. MAIN STREET SNOWFLAKE AZ 85937TODD HONYAOMA HOPI REP. HOPI TRIBE OFFICE of SEC. PO BOX 123 KYKOTSMOVI AZ 86039-

JACK HUSTED 248 BECKER LAKE ROAD SPRINGERVILLE AZ 85938DIXIE LEE JUDD MAYOR TOWN OF FREDONIA PO BOX 231 FREDONIA AZ 86022BILL JUSTICE MAYOR CITY OF PAGE P.O. BOX 1180 PAGE AZ 86040-

GORDON KEARL VICE MAYOR CITY OF SHOW LOW 890 E. PINE OAKS DR. SHOW LOW AZ 85901DUANE KIRBY COUNCILMAN CITY OF COTTONWOOD 827 N. MAIN ST. COTTONWOOD AZ 86326AL KUHNS COUNCILMAN TOWN OF DEWEY-HUMBOLDT PO Box 69 HUMBOLDT AZ 86329-

HOWARD LEVENTHAL NACDAB CHAIR P.O. BOX 960 ASHFORK AZ 86320BOB LUZIUS COUNCILMAN CITY OF PRESCOTT P.O. BOX 2059 PRESCOTT AZ 86302GLORIA MOORE COUNCILWOMAN TOWN OF CHINO VALLEY P.O. BOX 406 CHINO VALLEY AZ 86323LORA LEE NYE Town Council PRESCOTT VALLEY 7501 CIVIC CIRCLE PRESCOTT VALLEY AZ 86314-

CYNTHIA STUART Council Member CITY OF HOLBROOK 408 W. ARIZONA HOLBROOK AZ 86025-

PHILIP TOVREA PRIVATE SECTOR YAVAPAI COUNTY BOX E JEROME AZ 86331-

TOM M WHITE JR CHAIR SUPVR APACHE COUNTY P.O. BOX 1170 FT DEFIANCE AZ 86504ROSS OVERSON, JR MAYOR CITY OF ST. JOHNS P.O. BOX 455 ST JOHNS AZ 85936-

K BARBARA TEAGUE MAYOR TOWN OF PINETOP-LAKESIDE 1360 N NIELS HANSEN LANE LAKESIDE AZ 85929-

LARRY VICARIO 2569 S. WAPITI LANE PINETOP AZ 85935-

JERRY WILEY VICE MAYOR TOWN OF CLARKDALE 520 TODD CIRCLE CLARKDALE AZ 86324MATT RYAN IMMED PAST CHAIR SUPVR COCONINO COUNTY 219 E CHERRY AVENUE FLAGSTAFF AZ 86001

THOMAS THURMAN SUPERVISOR YAVAPAI COUNTY 1015 FAIR STREET PRESCOTT AZ 86305-

RONALD VOLKMAN P.O. BOX 1148 SEDONA AZ 86339-

LOUISE YELLOWMAN SUPERVISOR COCONINO COUNTY PO BOX 948 TUBA CITY AZ 86045-

NORTHERN ARIZONA COUNCIL OF GOVERNMENTS Balance Sheet – Governmental Funds June 30, 2007

	General Fund	Head	Aging and Adult Administration	Workforce Investment Act	Homes for Arizonans	Community Services Administration	Intermediary Relending Program	Other Governmental Funds	Total Governmental Funds
Assets Cash and cash equivalents Reserved cash Due from other governments Due from other funds Other receivables	\$ 714,418 68,841 383,430 41,131	\$ 2,500 143,071 2,349	\$ 826,843 - 247	\$ 1,000 - 1,759 28,246 306	\$ 365,226 152,934 243,561	190,651	\$ 983,626	\$ 427,487 8,724	\$1,083,144 983,626 1,811,586 663,961 44,060
TOTAL ASSETS	\$ 1,207,820	\$ 147,920	\$ 827,090	\$ 31,311	\$ 761,721	\$ 190,678	\$ 983,626	\$ 436,211	\$4,586,377
Liabilities Accounts payable Accrued expenses Deferred revenue Due to other funds	\$ 26,075 151,616	\$ 78,714 54,211	\$ 610,583 16,497 200,010	\$ 8,979 11,962 10,370	\$ 792 2,166	\$ 58,406 4,722 - 127,550	٠ ، ، ،	\$ 89,199 8,781 23 321,406	\$ 872,748 249,955 10,416 663,961
Total liabilities	177,714	147,920	827,090	31,311	2,958	190,678	1	419,409	1,797,080
Fund balances Unreserved Reserved	1,030,106	, ,	. 1 1	1 1	758,763	1 1	3,129	16,802	1,808,800
Total equity	1,030,106	'	•	•	758,763	•	983,626	16,802	2,789,297
TOTAL LIABILITIES AND FUND BALANCES	\$ 1,207,820 \$ 147,920	\$ 147,920	\$ 827,090	\$ 31,311	761,721	\$ 190,678	\$ 983,626	\$ 436,211	\$4,586,377

See accompanying notes to financial statements.

Statement of Revenue, Expenditures, and Changes in Fund Balance - Governmental Funds Year Ended June 30, 2007 NORTHERN ARIZONA COUNCIL OF GOVERNMENTS

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	General Fund	Head Start	Aging and Adult Administration	Workforce Investment Act	Homes for Arizonans	Community Services Administration	Intermediary Relending Program	Other Governmental Funds	Total Governmental Funds
Revenues									
Grant revenue	, 6⁄9	\$ 14,078,074	\$ 4,077,846	\$ \$26,559	\$ 1,690,413	\$ 884,853	649	\$ 2.697.225	\$ 23.954.970
In-kind revenue	,	3,992,328	258,263	•	•	,			
Fees for services	1,094,046	•	2,226,136	•	,	1	,	39,708	3,359,890
Interest	23,960	•	,	,		•	32.534	1	56.494
Miscellaneous	142,060	,	í	1	1,683	•		7.831	151 574
Indirect cost pool assessments	990,428		-	,	•	(ı	,	990,428
Total revenues	2,250,494	18,070,402	6,562,245	526,559	1,692,096	884,853	32,534	4,392,884	34,412,067
Expenditures									
Salaries and wages	838,784	7,043,589	595,722	239,729	019'16	153,515	ı	616,947	9.579.896
Employee-related expenses	246,334	2,955,919	206,318	161,89	27,819	47,927		160,840	3,713,348
Professional/outside services	169'98	68,445	259,055	26,795	3,785	1,325	•	248,925	645,021
Travel	48,263	310,087	66,954	7,330	8,415	7,555	1	103,239	551,843
Facility costs	81,009	672,614	36,688	43,035	6,662	7,112	•	58,997	906,117
Supplies and printing	28,203	223,084	35,596	7,267	6,155	8,421	1	12,021	320,747
Equipment	30,631	689*6	40,962	12,444		10,692		22,380	126,798
Operating services	184,476	474,342	95,960	27,532	7,507	20,173	1	72,703	882,693
Indirect cost pool assessments	25,255	766,265	88,210	25,866	10,032	16,921	1	57,879	990,428
Program services and supplies	548,064	1,554,040	4,878,517	68,370	1,421,711	611,212	42,193	1,343,658	10,467,765
In-kind	,	3,992,328	258,263		-		•	1,648,120	5,898,711
Total expenditures	2,067,710	18,070,402	6,562,245	526,559	1,583,696	884,853	42,193	4,345,709	34,083,367
Excess (deficiency) of revenues over (under) expenditures	182,784	ı	1	•	108,400	,	(9,659)	47,175	328,700
Other Financing Sources (Uses) Operating transfers in	18 937	,	4	,	•				0000
Operating transfers out						•	ı	1 2	18,937
Total other Geometre contract	- 200 81				-			(18,937)	(18,937)
total other mancing sources (uses)	18,937			,	-		1	(18,937)	
Excess (deficiency) of revenue and other sources over (under) expenditures and other uses	201,721	•		,	108,400	. 1	(6 659)	32 228	328 700
Fund balance, beginning of year	878 385		1		292 059		yac cuo	/	
					00000		C07,566	(11,430)	7,460,597
FUND BALANCE, END OF YEAR	\$ 1,030,106	54	69	4	\$ 758,763	S	\$ 983,626	\$ 16,802	\$ 2,789,297

See accompanying notes to financial statements.

 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. <u>MEMBERS</u> (A.R.S. § 10-11622.A.6)
Only Nonprofit Corporations must answer this question. This corporation DOES NOT I have members.
10. <u>CERTIFICATE OF DISCLOSURE</u> (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 <u>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]</u>
 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? One box <u>must</u> be marked: YES INO
One box <u>must</u> be marked: YES NO NO NOTE OF THE STATE OF
 Full name and prior names used. Full birth name. Present home address. Prior addresses (for immediate preceding 7 year period). Full birth name. Social Security Number 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.
11. <u>STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION</u> (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 <u>must</u> be marked: YES I 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 <u>must</u> 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. 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 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 Matt Ryan Date 2119108 Name Date
Signature noutre Signature
Title Cost Chaire Title (Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)