CORPORATION COMMISSION
CORPORATION ANNUAL REPORT & CERTIFICATE OF DISCLOSURE

AZ Corp. Commission
02485017

DUE ON OR BEFORE 01/01/2008 **FY07-08** **F.**

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.

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CORPORATIONS DIVISION

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CORPORATIONS DIVISION

1. ~0189629-3
GLEN CANYON NATURAL HISTORY ASSOCIATION
PO BOX 1835
PAGE, AZ 86040

Business Phone:_____ (Business phone is optional.)

State of Domicile: ARIZONA **Type of Corporation:** NON-PROFIT

2. Statutory Agent: CHRISTOPHER EATON
Mailing Address: PO BOX 1835
City, State, Zip: PAGE, AZ 86040

Physical Address, If Different.
Physical Address: 691 SCENIC VIEW RD
City, State, Zip: PAGE, AZ 86040

ACC USE ONLY
Fee $_____
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
__ 1. Accounting
__ 2. Advertising
__ 3. Aerospace
__ 4. Agriculture
__ 5. Architecture
__ 6. Banking/Finance
__ 7. Barbers/Cosmetology
__ 8. Construction
__ 9. Contractor
__ 10. Credit/Collection
__ 11. Education
__ 12. Engineering
__ 13. Entertainment
__ 14. General Consulting
__ 15. Health Care
__ 16. Hotel/Motel
__ 17. Import/Export
__ 18. Insurance
__ 19. Legal Services
__ 20. Manufacturing
__ 21. Mining
__ 22. News Media
__ 23. Pharmaceutical
__ 24. Publishing/Printing
__ 25. Ranching/Livestock
__ 26. Real Estate
__ 27. Restaurant/Bar
__ 28. Retail Sales
__ 29. Science/Research
__ 30. Sports/Sporting Events
__ 31. Technology(Computers)
__ 32. Technology(General)
__ 33. Television/Radio
__ 34. Tourism/Convention Services
__ 35. Transportation
__ 36. Utilities
__ 37. Veterinary Medicine/Animal Care
__ 38. Other _____

NON-PROFIT CORPORATIONS
1. __ Charitable
2. __ Benevolent
3. X Educational
4. __ Civic
5. __ Political
6. __ Religious
7. __ Social
8. __ Literary
9. __ Cultural
10. __ Athletic
11. __ Science/Research
12. __ Hospital/Health Care
13. __ Agricultural
14. __ Animal Husbandry
15. __ Homeowner's Association
16. __ Professional, commercial industrial or trade association
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)

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: FRANK TALBOTT
Title: PRESIDENT
Address: PO BOX 3776
PAGE, AZ 86040
Date taking office: 12/2007

Name: ROB PETERSON
Title: ~~SECRETARY~~/TREASURER
Address: PO BOX 183
PAGE, AZ 86040
Date taking office: 12/2007

Name: PAUL OSTAPUK
Title: VICE PRESIDENT
Address: PO BOX 3532
PAGE, AZ 86040
Date taking office: 12/2007

Name: JODY GEBHARDT
Title: SECRETARY
Address: PO BOX 2420
PAGE, AZ 86040
Date taking office: 12/2007

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

Name: KIM KEISLING
Address: PO BOX 7198
PAGE, AZ 86040
Date taking office: 11/2006

Name: JAMES PAGE
Address: PO BOX 4542
PAGE, AZ 86040
Date taking office: 11/2005

Name: CHARLENE BONE
Address: PO BOX 2655
PAGE, AZ 86040
Date taking office: 11/2004

Name: SCOTT SEYLER
Address: PO BOX 575
PAGE, AZ 86040
Date taking office: 11/2007

GLEN CANYON NATURAL HISTORY ASSOCIATION
STATEMENT OF FINANCIAL POSITION
September 30, 2007

ASSETS		
Cash and cash equivalents	$	107,797
Accounts receivable, deemed fully collectible		19,426
Inventory		90,435
Property and equipment, net of depreciation		23,279
TOTAL ASSETS	$	240,937
LIABILITIES		
Accounts payable	$	25,659
Accrued payroll and payroll taxes		13,012
Accrued personal leave		7,479
Current portion of long term debt		3,000
Notes payable - short term		1,841
Notes payable - long term		8,718
TOTAL LIABILITIES		59,709
NET ASSETS		
Unrestricted		132,293
Temporarily restricted		48,935
TOTAL NET ASSETS		181,228
TOTAL LIABILITIES AND NET ASSETS	$	240,937

See accompanying notes and accountant's report.

GLEN CANYON NATURAL HISTORY ASSOCIATION
STATEMENT OF ACTIVITIES
Year Ended September 30, 2007

UNRESTRICTED NET ASSETS		
Unrestricted revenues and gains		
Sales	$	458,425
Royalties		293
Bureau of Reclamation revenue		181,998
Interest income		208
Other income		11,480
TOTAL UNRESTRICTED REVENUES AND GAINS		652,404
Net assets released from restrictions		
Restrictions satisfied by payments		3,844
TOTAL UNRESTRICTED REVENUES, GAINS, AND OTHER SUPPORT		656,248
Expenses		
Program A - Aid to National Park Service		278,882
Program B - Bureau of Land Management		84,576
Program C - Bureau of Reclamation Tours		161,950
Management and general		90,215
TOTAL EXPENSES		615,623
INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS		40,625
TEMPORARILY RESTRICTED NET ASSETS		
Contributions		25,520
Interest earned		844
Net assets released from restrictions		
Restrictions satisfied by payments		(3,844)
INCREASE (DECREASE) IN TEMPORARILY RESTRICTED NET ASSETS		22,520
INCREASE (DECREASE) IN NET ASSETS		63,145
NET ASSETS AT BEGINNING OF YEAR		118,083
NET ASSETS AT END OF YEAR	$	181,228

See accompanying notes and accountant's report.

GLEN CANYON NATURAL HISTORY ASSOCIATION

STATEMENT OF FUNCTIONAL EXPENSES

Year Ended September 30, 2007

	Program A Aid to National Park Service	Program B Aid to Bureau of Land Mgt	Program C Bureau of Reclamation Tours	Management and General	Total
Compensation and related expenses					
Salaries	$ 53,235	$ 28,048	$ 148,830	$ 42,580	$ 272,693
Payroll taxes	4,058	2,179	11,286	3,132	20,655
	57,293	30,227	160,116	45,712	293,348
Cost of goods sold	178,566	47,082		709	226,357
Bank charges		45		138	183
Depreciation				1,190	1,190
Donations				249	249
Dues and subscriptions				948	948
Exhibits and programs	26,671	3,020		64	29,755
Insurance				15,047	15,047
Interest and credit card charges	9,303	2,128			11,431
Legal and accounting				5,415	5,415
Miscellaneous	457		201	5,049	5,707
Office expense			216	4,249	4,465
Postage/delivery	686			803	1,489
Repair and maintenance	223			4,841	5,064
Supplies	3,477	924			4,401
Telephone	2,041		1,355		3,396
Training and education			35	106	141
Travel	165	1,150		3,582	4,897
Uniforms			27	2,092	2,119
Loss on sale of assets				21	21
Total Expenses	$ 278,882	$ 84,576	$ 161,950	$ 90,215	$ 615,623

See accompanying notes and accountant's report.

GLEN CANYON NATURAL HISTORY ASSOCIATION
STATEMENT OF CASH FLOWS
Year Ended September 30, 2007

CASH FLOWS FROM OPERATING ACTIVITIES	
Increase (Decrease) in net assets	$ 63,145
Adjustments to reconcile increase in net assets to net cash (used) provided by operating activities:	
Depreciation	1,190
Loss on sale of equipment	21
(Increase) Decrease in accounts receivable	(1,012)
(Increase) Decrease in inventory	(7,937)
(Decrease) Increase in accounts payable	(12,903)
(Decrease) Increase in accrued payroll and payroll taxes	1,184
(Decrease) Increase in accrued leave days	1,524
NET CASH (USED) PROVIDED BY OPERATING ACTIVITIES	45,212
CASH FLOWS FROM INVESTING ACTIVITIES	
Equipment purchased	(4,965)
NET CASH (USED) PROVIDED BY INVESTING ACTIVITIES	(4,965)
CASH FLOWS FROM FINANCING ACTIVITIES	
Proceeds from short-term borrowing	4,841
Principle payments on debt	(5,250)
NET CASH (USED) PROVIDED BY FINANCING ACTIVITIES	(409)
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	39,838
CASH AND CASH EQUIVALENTS, beginning of year	67,959
CASH AND CASH EQUIVALENTS, end of year	$ 107,797

See accompanying notes and accountant's report.

ARIZONA CORPORATION COMMISSION

CORPORATIONS DIVISION
1300 West Washington
Phoenix, Arizona 85007-2929

GLEN CANYON NATURAL HISTORY ASSOCIATION
PO BOX 1835

PAGE, AZ 86040

Effective Date: **05/29/2008**
File No: **-0189629-3**

Original Due Date: **January 1, 2008** Received: **04/18/08**

We have deposited your check, however your annual report is being returned for the following reason(s):

Section 12 signature requirements are as follows:
Corporations - the signer shall be a duly authorized officer listed in section 7 on page 2. We can not accept this report unless officer signs the report and prints name, title, and the date. (Signature will not be accepted unless dated).

>> Section 12 page 3 signature part we need a current date.

IMPORTANT INFORMATION

Please note: This annual report has not been approved, it is being returned to you for corrections which are listed above. If you wish to avoid additional penalties and possible administrative dissolution, this report must be returned within 30 days after the effective date of this notice to be deemed timely filed. Refer to A.R.S. 10-1622.F for more information.

To successfully process your document, it is important for you to return:

1) A copy of this letter.
2) All annual report(s) which accompanied this letter (with corrections made).
3) Filing fee, penalties, or reinstatement fee if due.
4) Additional forms if required, like the Affidavit of Publication.

Completed

AR: 0021
REV. 03/2008

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.
2. Full birth name.
3. Present home address.
4. Prior addresses (for immediate preceding 7 year period).
5. Date and location of birth.
6. Social Security Number
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.

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 CHRISTOPHER KEATON **Date** 12-20-07 **Name** FRANK TALBOTT **Date** 6/5/08

Signature _____ **Signature** Frank Talbott

Title EXECUTIVE DIRECTOR **Title** PRESIDENT

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