



WEB FORM
COPY

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

AZ Corp. Commission
02798138

1912

DUE ON OR BEFORE 06/13/2009

FILING FEE \$10.00

PLEASE READ ALL INSTRUCTIONS. 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 derived from 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.

-0506766-5

MAY 26 2009

1. GREEN VALLEY ASSISTANCE SERVICES, INC.
250 E CONTINENTAL RD #102
GREEN VALLEY, AZ 85614-1806

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: _____
State of Domicile: ARIZONA

(Business phone is optional.)

Type of Corporation: NON-PROFIT

2.

Statutory Agent: GLENN LUNDELL
Mailing Address: 2117 W GRAMERCY DR
City, State, Zip: GREEN VALLEY, AZ 85614

Statutory Agent's Street or Physical Address, If Different.
Physical Address:
City, State, Zip:

ACC USE ONLY

Fee \$ _____
Penalty \$ _____
Reinstate \$ _____
Expedite \$ _____
Resubmit \$ _____

If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below. Note that the agent address must be in Arizona.

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. Cooperative Marketing Association |
| <input type="checkbox"/> 15. Animal Husbandry |
| <input type="checkbox"/> 16. Homeowner's Association |
| <input type="checkbox"/> 17. Professional, commercial
industrial or trade association |
| <input type="checkbox"/> 18. Other _____ |

5. CAPITALIZATION:

(For-profit 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:

(For-profit 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.

NONE ☐ Name: _____ Name: _____
Name: _____ Name: _____

7. OFFICERS PLEASE TYPE OR PRINT CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: ANN GILLINGHAM Name: GLENN LUNDELL
Title: TREASURER Title: PRESIDENT
Address: 3521 S VIA DEL TEJEDOR Address: 2117 W GRAMERCY DRIVE
GREEN VALLEY, AZ 85614 GREEN VALLEY, AZ 85622

Date taking office: 4/12/2008 Date taking office: 4/12/2005
Name: _____ Name: _____
Title: SEE ATTACHED Title: _____
Address: _____ Address: _____

Date taking office: _____ Date taking office: _____

8. DIRECTORS PLEASE TYPE OR PRINT CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: _____ Name: _____
Address: SEE ATTACHED Address: _____

Date taking office: _____ Date taking office: _____
Name: _____ Name: _____
Address: _____ Address: _____

Date taking office: _____ Date taking office: _____

Green Valley Assistance Services, Inc.
Board of Directors
May 1, 2009

Confidential

Do Not Distribute

<p>Christine BARTOLETTI, O.D. 516 E. Whitehouse Canyon Rd. Ste 160 Green Valley, AZ 85614 Home Phone: 520-648-1768 Business Phone: 520-625-5673 Fax: 520-625-6259 Cell: 403-3669 Email: cbartoletti@vistaeyecare Optometrist: Vista Eye Care Date Taking Office 12/02/05 Term Expires: 5/31/09 Spouse: Mike Bartoletti</p>	<p>Michael BARTOLETTI 3535 W. Calle Quatro Green Valley, AZ 85614 Home Phone: 520-648-1768 Business Phone: 520-625-1234 Fax: 520-625-6259 Email: mbart@greenvalleycooling.com VP Operations GV Heating and Cooling Date Taking Office: 12/02/05 Term Expires: 5/31/09 Spouse: Christine Bartoletti</p>
<p>Mark BOLLIN 2394 E. Bonita Canyon Dr. Green Valley, AZ. 85614 Cell: 520-548-5643 Email: mbollin@cox.net Date Taking Office: 12/11/08 Term Expires: 5/31/10</p>	<p>John FORD Casita Del Oro P. O. Box 1441 Tubac, AZ 85646 520-398-9252 (business) 520-398-3267 (home) jfordcasitadeloro@gmail.com Goldsmith Date Taking Office: 4/1/2009 Term Expires: 5/31/12 Spouse: Regina</p>
<p>Eloise FREDRICKSON 1673 W. Corte de Calvo Sahuarita, AZ 85629 Home Phone: 520-648-7317 Email eloisef@aol.com Date Taking Office: 2/01/09 Term Expires: 5/31/12</p>	<p>Ann GILLINGHAM, Treasurer 3521 S. Via Del Tejedor Green Valley, AZ 85614 Home Phone: 520-625-6511 Cell: 520-490-7622 Email: ann.gillingham@worldnet.att.net Retired Date Taking Office: 5/01/08 Term Expires: 5/31/11 Spouse: Peter Gillingham</p>

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<p>Galen JOHNSON 2620 E. Genevieve Way Green Valley, AZ 85614 Home: 520-396-4176 Email: galenjohnson@gmail.com Date Taking Office: 3/26/09 Term Expires: 5/31/12 Spouse: Anne Johnson</p>	<p>Glenn LUNDELL, President 2117 W. Gramercy Dr. Green Valley, AZ. 85622 Home Phone: 520-648-7299 Retired: (Human Resources Mgr./Consultant) Date Taking Office: 3/23/05 Term Expires 5/31/09 Spouse: Arlis Lundell</p>
<p>Amber MATHEWSON 17751 S. Placita de Niquel Sahuarita, AZ 85629 Home Phone: 520-625-8591 Business Phone: 520-594-5295 Ext. 5300 Email: ambermathewson@pima.gov Managing Librarian: GV Library Date Taking office: 6/01/07 Term Expires: 5/31/10</p>	<p>Carol MOLSKI 472 Pecan Valley Dr. Green Valley, AZ 85614 Home Phone: 520-648-1141 Email: jimmol56@peoplepc.com Retired: (Chaplain/Management) Date Taking Office: 5/01/08 Term Expires: 5/31/11 Spouse: Jim Molski</p>
<p>James MOLSKI 472 Pecan Valley Dr. Green Valley, AZ 85614 Home Phone: 520-648-1141 Email: jimmol56@peoplepc.com Retired: (Vocational Rehabilitation Consultant) Date Taking office: 5/01/08 Term Expires: 5/31/11 Spouse: Carol Molski</p>	<p>Rev. Martin OVERSON 1052 W. Rio Hondo Green Valley, AZ 85614 Home Phone: 520-625-5172 Pastor: Desert Hills Lutheran Church Spouse: Julianne Email: mnoverson@yahoo.com Date Taking office: 5/28/09 Term Expires: 5/31/12</p>
<p>Leo PAVLOVICH 1038 S. Horizonte Pl. Green Valley, AZ 85614 Home Phone: 520-648-2659 Email: leoandshirley@q.com Retired: Real Estate Specialist Date Taking Office: 2/05/09 Term Expires: 5/31/11 Spouse: Shirley</p>	<p>John J. SULLIVAN, Vice-President 15067 S. Camino Rio Puerco Sahuarita, AZ 85629 Home Phone: 520-207-1665 Email: maritajohn@cox.net Retired: (Law Office Administrator) Date Taking Office: 8/23/07 Term Expires: 5/31/10 Spouse: Marita Sullivan</p>

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BOARD SUB-COMMITTEES

Tom FORST

Budget/Finance/Investment Committee

530 W. Aspenwood St.

Green Valley, AZ 85614

Tomforstsrecs.com

Home Phone: 777-4141

11:29 AM
04/01/09
Cash Basis

Green Valley Assistance Services, Inc.
Balance Sheet
As of December 31, 2008

Dec 31, 08

ASSETS

Current Assets

Checking/Savings

Cash 128,740
Food/Gas Certificates 1,360

Total Checking/Savings 130,100

Other Current Assets

Deposits (Deposits) 500
Interest in Arizona Community F 167,112
Interest in Comm Found So Az 792,494

Total Other Current Assets 960,106

Total Current Assets 1,090,206

Fixed Assets

Fixed Assets 20,324

Total Fixed Assets 20,324

TOTAL ASSETS 1,110,529

LIABILITIES & EQUITY

Liabilities

Current Liabilities

Other Current Liabilities

Temporarily Restricted Funds 5,995
2100 - Payroll Liabilities 505

Total Other Current Liabilities 6,500

Total Current Liabilities 6,500

Total Liabilities 6,500

Equity

Fund Balance 753,577
Restricted Endowment Fund 234,757
Unrestricted Funds 206,708
Net Income -91,014

Total Equity 1,104,029

TOTAL LIABILITIES & EQUITY 1,110,529

11:29 AM
04/01/09
Cash Basis

Green Valley Assistance Services, Inc.
Profit & Loss
January through December 2008

	<u>Jan - Dec 08</u>
Ordinary Income/Expense	
Income	
Other Income	59,189.10
Grant Donations	158,479.98
Fundraising Events	78,379.26
Donations	96,708.39
Receipts for Seasonal Programs	32,187.46
Total Income	<u>424,944.19</u>
Expense	
Special Program Expenses	5,000.00
Funds Provided for Clients	149,097.32
Program Staffing	179,097.06
Depreciation Expense	2,951.00
Occupancy	19,502.89
Operating Costs	46,176.01
Personnel	48,273.60
Total Expense	<u>450,097.88</u>
Net Ordinary Income	<u>-25,153.69</u>
Other Income/Expense	
Other Income	
Wills/Bequests (From Wills & Bequests)	8,287.81
Total Other Income	<u>8,287.81</u>
Other Expense	
Invest Loss in AZ Comm Found.	74,147.87
Total Other Expense	<u>74,147.87</u>
Net Other Income	<u>-65,860.06</u>
Net Income	<u><u>-91,013.75</u></u>

9. FINANCIAL DISCLOSURE (A.R.S. §10-11622(A)(9))

Nonprofits – if your annual report is due on or before September 25, 2008, you **must attach** a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). If your nonprofit annual report is due after September 25, 2008, a financial statement is not required. **Cooperative marketing associations** must in all cases submit a financial statement. All other forms of corporations are exempt from filing a financial statement no matter what date the annual report was due.

ONLY NONPROFIT CORPORATIONS MUST ANSWER THIS QUESTION:

9A. MEMBERS (A.R.S. §10-11622(A)(6))

This corporation **DOES** ☐ **DOES NOT** ☒ have members.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§ 10-202(D), 10-3202(D), 10-1622(A)(8) & 10-11622(A)(7))

- A. Has any person who is currently an officer, director, trustee, incorporator, or who, in a For-profit corporation, controls or holds more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation been:
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. 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" to A, 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 birth name. | 5. Date and location of birth. |
| 2. Full present name and prior names used. | 6. 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. |
| 3. Present home address. | |
| 4. All prior addresses for immediately preceding 7 year period. | |
- B. Has any person who is currently an officer, director, trustee, incorporator, or who, in a For-profit corporation, controls or holds over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a 20% interest in any other corporation on the bankruptcy or receivership of that other corporation?

One box must be marked: YES ☐ **NO** ☒

If "YES" to B, the following information **must be submitted** as an attachment to this report for each corporation subject to the statement above.

- (a) Name and address of each corporation and the persons involved.
- (b) State(s) in which it: (i) was incorporated and (ii) transacted business.
- (c) Dates of corporate operation.

11. STATEMENT OF BANKRUPTCY OR RECEIVERSHIP (A.R.S. §§ 10-1623 & 10-11623)

- A. Has the **corporation** filed a petition for bankruptcy or appointed a receiver? **One box must be marked: YES** ☐ **NO** ☒

If "Yes" to A, the following information **must be submitted** as an attachment to this report:

1. All officers, directors, trustees and major stockholders of the corporation within one year of filing the petition for bankruptcy or the appointment of a receiver. If a major stockholder is a corporation, the statement shall list the current president, chairman of the board of directors and major stockholders of such corporate stockholder. "Major stockholder" means a shareholder possessing or controlling twenty per cent of the issued and outstanding shares or twenty per cent of any proprietary, beneficial or membership interest in the corporation.
2. Whether any such person has been an officer, director, trustee or major stockholder of any other corporation within one year of the bankruptcy or receivership of the other corporation. If so, for each such corporation give:
 - (a) Name and address of each corporation;
 - (b) States in which it: (i) was incorporated and (ii) transacted business.
 - (c) Dates of operation.

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 perjury, 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 perjury 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 Glenn H. Lundell Date 5/22/09 Name ANN SILLINGHAM Date 5/22/09
 Signature [Signature] Signature [Signature]
 Title President Title Treasurer

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



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