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2.

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





DUE ON OR BEFORE 05/13/2014

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 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.

APR 2 5 2014

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O/64598-5 FIRST SOUTHERN BAPTIST CHURCH PRESCOTT VALLEY 2820 N PLEASANT VIEW DR PRESCOTT VALLEY AZ 86314

		(928) 772-7218 : A R-IZ UNA	(Business phone is optional.) Type of Corporation:			
	Statutory Agent:	TRAVIS NEIL GRANT 4757 N WYCLIFFE DR PRESCOTT VALLEY AZ 86314	Statutory Agent's Street or Physical Address, If Different.			
ACC	USE ONLY					
Fee	\$		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.			
Penalty	\$	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.				
Reinstate	\$,,			
Expedite	s	Signa	ature of new Statutory Agent			

Printed Name of new Statutory Agent

3. Secondary Address:

Resubmit\$

(Foreign Corporations are <u>REQUIRED</u> to complete this section).

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

BUSINESS CORPORATION	<u>NS</u>	NON-PROFIT CORPORATIONS		
□ 1. Accounting	□ 20. Manufacturing	1. Charitable		
2. Advertising	🗖 21. Mining	2. E Benevolent		
3. Aerospace	□ 22. News Media	3. 🖾 Educational		
4. Agriculture	☐ 23. Pharmaceutical ☐	4. 🚾 Civic		
5. Architecture	24. Publishing/Printing	5. 📺 Political		
🗁 6. Banking/Finance	☐ 25. Ranching/Livestock	6. 🚾 Religious		
7. Barbers/Cosmetology	🗂 26. Real Estate	7. 📼 Social		
8. Construction	□ 27. Resteurant/Bar	8. 🛄 Literary		
9. Contractor	🗖 28. Retail Sales	9. 🚃 Cultural		
10. Credit/Collection		10. 🚞 Alhietic		
11. Education	30. Sports/Sporting Events	 11. Science/Research 		
📺 12. Engineering	31. Technology(Computers)	12. 📺 Hospital/Health Care		
13. Entertainment	☐ 32. Technology(General)	13. 📺 Agricultural		
14. General Consulting	☐ 33. Television/Radio	 14. Cooperative Marketing Association 		
☐ 15. Health Care	34. Tourism/Convention Services	15. 🚃 Animal Husbandry		
🖂 16. Hotel/Motel	☐ 35. Transportation	16. Homeowner's Association		
17. Import/Export	📺 36. Utilities	17. 🗁 Professional, commercial		
18. Insurance	37. Veterinary Medicine/Animal Care	industrial or trade association		
☐ 19. Legal Services	□ 38. Other	18. 🖽 Other		

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Plea	ase Enter Corporation Name: _ <i>アペー</i> :	SCUTT	VALL	c 4	File number <u>0/6//5</u>	<i>୭୫-</i> େ Page 3
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.						
<u>ONI</u>	Y NONPROFIT CORPORATIONS MUST A	NSWER THIS				
9A.	MEMBERS (A.R.S. §10-11622(A)(6))		This c	orporat	tion DOES 🔯 DOES NOT 🗓 ha	ve members.
10. §	 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. 2. 3. 	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?					
	(c) the antitrust or restraint of trade law	s of that juriso	iction?	0	have must be marked. VES	T NO ET
	If "YES" to A, the following information nations stated in Items 1 through 3 above.	nust be subn	<u>ritted</u> as an		box must be marked: YES Int to this report for each person subject to	
	Full birth name. Full present name and prior names use Present home address. All prior addresses for immediately period.		/ear	5. 6.	Date and location of birth. The nature and description of each conaction; the date and location; the court a involved; and the file or cause number of	nd public agency
B.	•					
	If "YES" to B, the following information	must be sub	mitted as a	_		
	statement above. (a) Name and address of each corpora (b) State(s) in which it: (i) was incorpor (c) Dates of corporate operation.					
11.	11. STATEMENT OF BANKRUPTCY OR RECEIVERSHIP (A.R.S. §§ 10-1623 & 10-11623)					
Α.	VEC ENO E					
	2. Whether any such person has been a	n officer, direc	tor, trustee	or major s	stockholder of any other corporation within	one year of the
	bankruptcy or receivership of the othe	r corporation.	if so, for eac	ch such c	orporation give:	
	(a) Name and address of each o	orporation;				
	(b) States in which it: (i) was ince	orporated and	(ii) transa	acted bus	siness.	
	(c) Dates of operation.					
12. <u>SIGNATURES:</u> 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.						
Nar	Name SHERRIE L HUNT Date 4/24/2014 Name Date					
Signature A Ronie T Hrost Signature_						
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AR:0046 Rev. 12/2008

Title CHURCH TREASURER

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