

E-FILED

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

06278719



DUE ON OR BEFORE 6/10/2018

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.

16865329

PASS THE BALANCED BUDGET AMENDMENT, INC.
 1819 N 40TH UNIT 18
 PHOENIX, ARIZONA 85008

Business Phone:

(Business phone is optional.)

State of Domicile: AZ

Type of Corporation: NON-PROFIT

2. Statutory Agent: SAM STONE

Statutory Agent's Street or Physical Address:

Mailing Address: 1819 N 40TH ST UNIT 18

City, State, Zip: PHOENIX, ARIZONA 85008

Physical Address:
City, State, Zip:

ACC USE ONLY

Fee:

10.00

Penalty:

Reinstate:

Expedite:

Resubmit:

If appointing a new statutory	y agent, the new agent MUST consent to that
ppointment 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. Character of Business:

EDUCATIONAL

Received: 3/12/2018 8:56:30 AM

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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.

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)
1000.00	COMMON	
0.00		

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)
0.00		
0.00		

6.	SHAREHOLDERS:
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(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.

Name: Name:

Name: Name:

7. OFFICERS:

Name	Title	Date Taking Office
SAM STONE	SECRETARY	5/10/2016
1819 N 40TH ST UNIT 18, PHOENIX, ARIZONA 85008		

8. **DIRECTORS**:

Name	Date Taking Office
JOSH JONES	12/1/2017
746 E WINCHESTER STE 140, MURRAY, UTAH 84107	
SAM STONE	5/10/2016
1819 N 40TH ST UNIT 18, PHOENIX, ARIZONA 85008	
MIKE MCCAULEY	5/10/2016
10 BROADWAY, SALT LAKE CITY, UTAH 84101	

9. FINANCIAL DISCLOSURE (A.R.S.§10-1	1622(A)(9))
	uired. Cooperative marketing associations – must submit a financial statement. All other
ONLY NONPROFIT CORPORATIONS MUST A	
9A. <u>MEMBERS</u> (A.R.S. §10-11622(A)(6))	This corporation DOES DOES NOT X have members.
10. CERTIFICATE OF DISCLOSURE (A.R.S. §	;10-202(D), 10-3202(D),10-1622(A)(8) & 10-11622(A)(7))
 and outstanding common shares or 10% of any other p 1. Convicted of a felony involving a transaction in s immediately preceding the execution of this certificate? 2. Convicted of a felony, the essential elements of monopoly in any state or federal jurisdiction with certificate? 3. Subject to an injunction, judgment, decree or per 	on, or
more of the actions stated in Items 1 through 1. Full birth name. 2. Full present name and prior names us 3. Present home address.	 5. Date and location of birth. ed. 6. The nature and description of each conviction or judicial action; the date and location; the court
All prior addresses for immediately preperiod.	cause number of the case.
	r, trustee, incorporator, or who, in a For-profit corporation, controls or holds over 20% of the issued and etary, beneficial or membership interest in the corporation, served in any such capacity or held a 20% ceivership of that other corporation?
	One box must be marked: YES NO X
statement above.	nust be submitted as an attachment to this report for each corporation subject to the orporation and the persons involved. corporated and (ii) transacted business.
11. STATEMENT OF BANKRUPTCY OR RECE	IVERSHIP (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 X
the appointment of a receiver. the board of directors and maj	be submitted as an attachment to this report: and major stockholders of the corporation within one year of filing the petition for bankruptcy or If a major stockholder is a corporation, the statement shall list the current president, chairman of or stockholders of such corporate stockholder. "Major stockholder" means a shareholder by per cent of the issued and outstanding shares or twenty per cent of any proprietary, beneficial

- or membership interest in the corporation.
- 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.

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: Sam Stone Date:3/12/2018

Signature: Sam Stone

SECRETARY

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

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Title: