



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

Arizona Corporation Commission



00387866

DUE ON OR BEFORE 10/23/2001

FY01-02

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 necessary. Information for the report should reflect the current status of the corporation. See instructions for proper format. REFER TO THE INSTRUCTIONS ON PAGE 4.

- 1. -0124776-7 CENTRAL ARIZONA SPECULATIVE FICTION SOCI PO BOX 62613 PHOENIX, AZ 85082-2613

Business Phone: (Business phone is optional.) State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

RECEIVED

- 2. Arizona Statutory Agent: JIM STRAIT Street Address: 5229 N 18TH DR PHOENIX, AZ 85015 City, State, Zip:

OCT 11 2001

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

Use this box only if appointing a new Statutory Agent

ACC USE ONLY Fee \$ 45 Penalty \$ Reinstatement \$ Expedite \$ Resubmit \$ 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

- 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. Barber/Cosmetology 8. Construction 9. Contractor 10. Credit Collection 11. Education 12. Engineering 13. Entertainment 14. General Consulting 15. Health Care 16. Hotel/Travel 17. Import/Export 18. Insurance 19. Legal Services 20. Manufacturing 21. Mining 22. News Media 23. Pharmaceutical 24. Publishing/Printing 25. Rearing/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. 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

-0124776-7 CENTRAL ARIZONA SPECULATIVE FICTION SOCIETY, INC.

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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.

Number of Shares/Certificates Authorized Class Series Within Class (if any)

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.**

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

7. **OFFICERS** Please Type or Print Clearly.

Name: <u>David M. Hungerford III</u>	Name: <u>Edward Lee Whiteside</u>
Title: <u>President</u>	Title: <u>Vice-President</u>
Address: <u>3630 S. Kenwood Ln.</u> <u>Tempe, AZ 85282</u>	Address: <u>4354 N. 82nd St # 235</u> <u>Scottsdale, Az 85251</u>
Date taking office: <u>7-27/01</u>	Date taking office: <u>7-27-01</u>
Name: <u>GARY L. SWATY</u>	Name: <u>STEPHANIE L BANNER</u>
Title: <u>SECRETARY</u>	Title: <u>Treasurer</u>
Address: <u>2046 E. SOUTH MOUNTAIN</u> <u>PHOENIX AZ 85042-8128</u>	Address: <u>7213 N 37th DR</u> <u>PHX AZ 85051</u>
Date taking office: <u>JULY 27, 2001</u>	Date taking office: <u>7-1-01</u>

8. **DIRECTORS** Please Type or Print Clearly.

Name: <u>David M. Hungerford III</u>	Name: <u>Edward Lee Whiteside</u>
Address: <u>3630 S. Kenwood Ln.</u> <u>Tempe, AZ 85282</u>	Address: <u>4354 N 82nd St # 235</u> <u>Scottsdale, Az 85251</u>
Date taking office: <u>7-1/01</u>	Date taking office: <u>7-1-01</u>
Name: <u>Brian Koon</u>	Name: <u>Jeff Georse</u>
Address: <u>1724 E. South Mt Ave</u> <u>Phoenix, AZ 85012</u>	Address: <u>1817 W. Buchanan St.</u> <u>Phoenix, AZ 85027</u>
Date taking office: <u>7/1/01</u>	Date taking office: <u>7/1/01</u>

Account Balances Report
As of 9/30/01

10/8/01

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Account	9/30/00 Balance	12/31/00 Balance	9/30/01 Balance
Bank Accounts			
CASFS Credit Card	3,949.33	829.36	3,445.16
CASFS Main	1,314.86	1,205.86	271.79
ConNotations	1,735.77	2,247.81	377.77
CopperCon (Even)	463.27	4,103.79	2,000.00
CopperCon (Odd)	0.00	0.00	9,247.14
HexaCon (Even)	0.00	0.00	1,488.26
HexaCon (Odd)	1,261.35	1,002.41	7,188.84
TOTAL Bank Accounts	8,724.58	9,389.27	23,978.98
Asset Accounts			
CASFS CD	0.00	3,370.12	3,455.00
TOTAL Asset Accounts	0.00	3,370.12	3,455.00
OVERALL TOTAL	8,724.58	12,759.39	27,433.98

Please Enter Corporation Name: CENTRAL ARIZONA SPECULATIVE FLUXION SOCIETY Page 3

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)

Nonprofit corporations must attach a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corporations Only:

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

11. STATEMENT OF BANKRUPTCY (A.R.S. §§10-202.D.2 & 10-3202.02)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 20% of the issued and outstanding common shares or 20% of any other proprietary, beneficial or membership interest in the corporation served in such capacity or held a 20% interest in any other corporation during the bankruptcy, receivership, or charter revocation of the other corporation? [Underlined portion pertains to profit corporations only]

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

Chapter _____ Date Filed _____ Case Number _____

If "YES", 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. 2) The state in which each corporation was incorporated b) transacted business. 3) The dates of corporate operation.

12. SIGNATURES

CAUTION: Annual Reports must be signed by a duly authorized officer. Annual Reports submitted with incorrect signatures 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 David M. Hungarford Date 8-31-01 Name Steph L. Brown Date 9-5-01
 Signature [Signature] Signature [Signature]
 Title President Title Treasurer

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