

5 1 3 0 0 7 0 0 2 8

MAILING LABEL
POSTAGE WILL BE PAID BY ADDRESSEE

MAIL OR DELIVER TO:
ARIZONA CORPORATION COMMISSION

ARIZONA CORPORATION COMMISSION
1001 N. CENTRAL AVENUE

ANNUAL REPORT & CERTIFICATE OF DISCLOSURE

(Pursuant to ARS 10-125, 10-1081, 10-128 and 10-1084)

DIRECTIONS: ANSWER ALL QUESTIONS IN EACH SECTION OF THIS ANNUAL REPORT AND RETURN WITH YOUR FEE TO THE ARIZONA CORPORATION COMMISSION PLEASE TYPE OR PRINT IN BLACK INK

A. CORPORATION INFORMATION (PLEASE MAKE ANY CHANGES OR CORRECTIONS IN SECTION B.)

FILE NO 179005-5

Corporation Name **PART-TIME FACULTY ASSOCIATION OF THE MARICOPA COUNTY COMM**
Street Address ~~7 HERBERT J GREEN~~
~~7130 E GARY RD~~

P.O. Box (if any)
City State Zip Code **SCOTTSDALE**

MAKE CHECK PAYABLE TO:
AZ 85254 ARIZONA CORPORATION COMMISSION

TYPE OF CORPORATION **NON-PROFIT**
FEE \$ 10
PENALTY \$ _____
TOTAL DUE \$ _____

AGENT ID # 0000013116

Name of Arizona Statutory Agent **EDMUND Y NOMURA**
5103 E THOMAS RD

Street Address (NOT P.O. BOX)

City, State, Zip Code **PHOENIX AZ 85018**

ANNUAL REPORT FOR YEAR ENDING		
<u>12</u>	<u>31</u>	<u>89</u>
MO	DAY	YR
DUE ON OR BEFORE		
<u>04</u>	<u>15</u>	<u>90</u>
MO	DAY	YR

***** ALLOW 8 WEEKS FOR PROCESSING *****

B. CHANGES OR CORRECTIONS:

ADDRESS *c/o NANCY WIGHTMAN*
P.O. BOX 1428
PHOENIX AZ 85001-0428

C. BRIEF STATEMENT OF THE CHARACTER OF BUSINESS IN WHICH THE CORPORATION IS ACTUALLY ENGAGED IN ARIZONA
Professional membership association of part-time educators

D. CAPITALIZATION: (AS STATED IN CURRENT ARTICLES OF INCORPORATION) (NOT REQUIRED FOR NONPROFIT CORPORATIONS)

NUMBER AUTHORIZED	CLASS	SERIES	PAR VALUE
NUMBER ISSUED	CLASS	SERIES	PAR VALUE

E. SHAREHOLDERS DIRECTIONS: Fill in names of shareholders of record holding more than 20% of any class of shares issued by the corporation including beneficially holding such shares through nominees. If additional space is needed attach a separate sheet in same order as above.

Shareholder Name *None*

MAY 29 1990

Shareholder Name

Shareholder Name

DOCUMENTS ARE SUBJECT TO REVIEW BEFORE FILING

APR 16 1990

DOCUMENTS ARE SUBJECT TO REVIEW BEFORE FILING

NOTE: If appointing new statutory agent, the new agent must consent to that appointment, and PRESIDENT must sign this report (Page-4)

I, (individual) and/or We, (corporation), having been appointed to act as Statutory Agent, hereby consent to act in that capacity until removal or resignation is submitted in accordance with the Arizona Revised Statutes.

STATUTORY AGENT

FOREIGN CORPORATIONS: If not included on page 1, please list address of place of business in Arizona, if applicable.

NOTE: ALL CORPORATIONS MUST LIST THEIR OFFICERS AND DIRECTORS.
DATES TAKING OFFICE MUST BE INCLUDED.
ATTACH ADDITIONAL SHEETS IF NECESSARY.

F. OFFICERS *PLEASE SEE ATTACHED SHEET FOR LIST OF NEW OFFICERS. ALL TAKE OFFICE 5-29-89.*
(President And Secretary Cannot Be Same Person.)

President
Name Stephen J. Jenkins
Street Address _____
P O Box 1428
City State Zip Code Phoenix 85001-0428
Date of taking this office MO 12 DAY 1 YR 89

Vice-President
Name Elaine Letarte
Street Address _____
P O Box 1428
City State Zip Code Phoenix 85001-0428
Date of taking this office MO 2 DAY 1 YR 96

Secretary
Name Al Feldman
Street Address _____
P O Box 1428
City State Zip Code Phoenix 85001-0428
Date of taking this office MO 5 DAY 15 YR 89

Treasurer
Name R. A. Johnson
Street Address _____
P O Box 1428
City State Zip Code Phoenix 85001-0428
Date of taking this office MO 5 DAY 15 YR 89

Other Executive Officer (Title) EXECUTIVE DIR
Name NANCY WIGHTMAN
Street Address 4302 W OSBORN RD
P O Box 1428
City State Zip Code PHOENIX AZ 85011
Date of taking this office MO 5 DAY 5 YR 90

G. DIRECTORS
(Profit Require At Least One (1) Director. Nonprofit Require At Least Three (3) Directors.)

Director
Name _____
Street Address _____
P O Box _____
City State Zip Code _____
Date of taking this office MO _____ DAY _____ YR _____

Director
Name _____
Street Address _____
P O Box _____
City State Zip Code _____
Date of taking this office MO _____ DAY _____ YR _____

Director
Name _____
Street Address _____
P O Box _____
City State Zip Code _____
Date of taking this office MO _____ DAY _____ YR _____

Director
Name _____
Street Address _____
P O Box _____
City State Zip Code _____
Date of taking this office MO _____ DAY _____ YR _____

Director
Name _____
Street Address _____
P O Box _____
City State Zip Code _____
Date of taking this office MO _____ DAY _____ YR _____



Part-Time Faculty Association
of the
Maricopa Community College District
P.O. Box 1428
Phoenix, AZ 85001-0428

OFFICERS 1990-91

President

Elaine LeTarte
4507 E. Riverside #288
Phoenix, AZ 85040
431-9267 255-1444

Treasurer

Nancy Musser
3813 W Barbara Ave
Phoenix, AZ 85051
841-2041 392-5087

Vice President

Al Feldman
1051 S. Dobson #9
Mesa, AZ 85202
964-7225 253-6359

Secretary

Marjorie Mead
3837 W Hatcher Rd
Phoenix, AZ 85051
973-5599

CAMPUS REPRESENTATIVES

Phoenix College	Sandra Hathy 2917 N. 17th Dr. Phoenix, AZ 85015 252-5364	Chandler Gilbert	Vicki Morrison 1208 W Marlboro Chandler, AZ 85224 963-5464
Paradise Valley	Jackie Markus 8055 Via Palma Scottsdale, AZ 85258 991-0237	Mesa	Lyle Salmi 835 S Farmer Tempe, AZ 85284 966-0511
Glendale	Wayne Witzig 2515 E. Thomas #16-744 Phoenix, AZ 85016 582-5433 381-8131	Gateway	Lynn Hoover 1013 W Barcelona Gilbert, AZ 85234 892-0830
Scottsdale	Madhuri Bapat 921 W University Dr #1160 Mesa, AZ 85201 461-0594	Rio Salado	OPEN
South Mountain	OPEN	Estrella Mountain	OPEN

ptfa Executive Director: Nancy Wightman, G.W. Services
4309 W. Osborn Road
Phoenix, AZ 85031 269-8798

5 1 0 0 7
STATEMENT OF FINANCIAL CONDITION
BALANCE SHEET

THE FOLLOWING BALANCE SHEET MUST BE COMPLETED. IF NO BUSINESS WAS CONDUCTED THIS FISCAL YEAR, THEN SO INDICATE. (PROFIT CORPORATIONS may substitute a copy of the Schedule L, Form 1120, filed with the Internal Revenue Service. NONPROFIT CORPORATIONS may substitute a copy of Page 99 filed with the Arizona Department of Revenue. NOTE: FEDERAL AND STATE TAX EXEMPTION DOES NOT EXEMPT NONPROFIT CORPORATIONS FROM FILING THIS STATEMENT OF FINANCIAL CONDITION WITH THE COMMISSION. (A.R.S. 10-1081(A.6)).

<u>ASSETS</u>	<u>AMOUNT</u>	<u>TOTAL</u>
Cash		1892.53
Trade notes and accounts receivable		
(a) Less allowance for bad debts		
Inventories		
Gov't obligations (a) U.S. and instrumentalities		
(b) State, subdivisions thereof, etc.		
Other current assets		
Loans to shareholders		
Mortgage and Real Estate loans		
Other investments		
Buildings and other fixed depreciable assets		
(a) Less accumulated depreciation		
Depletable assets		
(a) Less accumulated depletion		
Land (net of any amortization)		
Intangible assets (amortizable only)		
(a) Less accumulated amortization		
Other assets		
Total assets		1892.53

LIABILITIES AND CAPITAL

Accounts payable		
Mtges. notes, bonds payable in less than 1 yr		
Other current liabilities		
Loans from shareholders		
Mtges. notes, bonds payable in 1 yr or more		
Other liabilities		
Total Liabilities		
Capital stock (a) Preferred stock		
(b) Common stock		
Paid-in-or capital surplus		
Retained earnings - Appropriated		
Retained earnings - Unappropriated	1892.53	
Less cost of treasury stock		
Total Capital		1892.53
Total Liabilities and Capital		1892.53

I. CERTIFICATE OF DISCLOSURE
A.R.S. Sections 10-128, 10-1084

- A. Has any person serving either by election or appointment as officers, directors, trustees, incorporators and persons 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:
- 1. Been 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. Been convicted of a felony the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraining of trade or monopoly in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate.
 - 3. Been 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 the execution of this certificate where such injunction, judgment, decree or permanent order:
 - (a) involved the violation of fraud or registration provisions of the securities laws of that jurisdiction; or
 - (b) involved the violation of the consumer fraud laws of that jurisdiction; or
 - (c) involved the violation of the antitrust or restraint laws of trade laws of that jurisdiction.

YES NO

- B. 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 A.1 through A.3:
- 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.

J. ALL CORPORATE TAX RETURNS REQUIRED BY TITLE 43 HAVE BEEN FILED WITH THE ARIZONA DEPARTMENT OF REVENUE.

Under penalties of law, I declare that I have examined this report and the certificates, including any attachments, and to the best of my knowledge and belief it is true, correct and complete. (MUST BE SIGNED BY OFFICER INCLUDED IN SECTION F.)

Nancy Wightman DATE *5-27-90* *Raj Arora* DATE *4/13/90*
 EXECUTIVE DIRECTOR TREASURER

REMINDER: FORM MUST BE SIGNED, ALL FEES INCLUDED AND THE FINANCIAL STATEMENT COMPLETED.

ARIZONA CORPORATION COMMISSION
 1200 W WASHINGTON
 P O BOX 2019
 PHOENIX ARIZONA 85005

PRESORTED
 FIRST CLASS MAIL
 U.S. POSTAGE PAID
 PHOENIX AZ
 Permit No 621

PART-TIME FACULTY ASSOCIATION OF THE MARICOPA COUNTY COMMUNI
 % HERBERT J GREEN
 7130 E GARY RD
 SCOTTSDALE AZ 85254