



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

AR Corp. Commission



01727910

DATE OF REPORT 04/15/2006

FY05-06

FILING FEE \$10.00

The following information is required by A.R.S. §§10-1022 & 10-11022 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §§10-1024, & 10-1121.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 on page 4 for paper format.

1. -6992735-1  
WESTSIDE BUSINESS PITCHING ASSOCIATION, INC. (INCORPORATED)  
PO BOX 67457  
PHOENIX, AZ 85082

RECEIVED

MAY 12 2006

ARIZONA CORP. COMMISSION  
CORPORATION DIVISION  
RECEIVED

Business Phone: \_\_\_\_\_

(Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NDC-290017

2. Statutory Agent: HANCOCKITE MORSEY  
Building Address: 4814 N SWAN DR  
City, State, Zip: PHOENIX, AZ 85018

Physical Address: 22 N 14th Avenue, AUG 28 2006

Physical Address:  
City, State, Zip:

ARIZONA CORP. COMMISSION  
CORPORATION DIVISION

ADD HERE ONLY

Fax # \_\_\_\_\_  
Family # \_\_\_\_\_  
Residence # \_\_\_\_\_  
E-mail # \_\_\_\_\_  
Internet # \_\_\_\_\_

Use this box only if appointing a new Statutory Agent

If appointing a new statutory agent, the new agent MUST consent to their appointment by signing below.

I (I/We, as partner or limited liability company) hereby have designated the new Statutory Agent, do hereby consent to this appointment and my consent is irrevocable pursuant to law.

Signature of new Statutory Agent

Printed Name of new Statutory Agent

3. Secondary Address:

(Foreign Corporations are prohibited to complete this section.)

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

- | BUSINESS CORPORATIONS    |                         | NON-PROFIT CORPORATIONS             |
|--------------------------|-------------------------|-------------------------------------|
| 1. Accounting            | 10. Manufacturing       | 1. Charitable                       |
| 2. Advertising           | 11. Mining              | 2. Cemetery                         |
| 3. Aerospace             | 12. Food/Beverage       | 3. Educational                      |
| 4. Agriculture           | 13. Financial           | 4. Child                            |
| 5. Architecture          | 14. Publishing/Printing | 5. Fraternal                        |
| 6. Business Process      | 15. Retail/Wholesale    | 6. Religious                        |
| 7. Business Development  | 16. Real Estate         | 7. Social                           |
| 8. Construction          | 17. Retail/Wholesale    | 8. Library                          |
| 9. Contractor            | 18. Retail/Broker       | 9. Cultural                         |
| 10. Construction         | 19. Retail/Broker       | 10. Sports                          |
| 11. Education            | 20. School/Educational  | 11. School/Educational              |
| 12. Engineering          | 21. Special Services    | 12. Hospital/Health Care            |
| 13. Environmental        | 22. Technology/Computer | 13. Agricultural                    |
| 14. General Consulting   | 23. Technology/Computer | 14. Animal Husbandry                |
| 15. Health Care          | 24. Technology/Computer | 15. Government/Non-Profit           |
| 16. Hospital/Health Care | 25. Technology/Computer | 16. Professional, non-profit        |
| 17. Insurance            | 26. Technology/Computer | 17. Individual or small association |
| 18. Insurance            | 27. Technology/Computer | 17. Other                           |
| 19. Legal Services       | 28. Other               |                                     |

**6. CAPITALIZATION:** (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

Business trusts must include the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate. Please Indent or Type Clearly.

6a. 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)

0

6b. 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

**8. SHAREHOLDERS:** (Business Corporations and Business Trusts are **REQUIRED** to complete this section.)

List shareholders holding more than 10% of any class of shares issued by the corporation, or having more than a 10% beneficial interest in the corporation. Please Type or Print Clearly.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

None

Name: \_\_\_\_\_ Name: \_\_\_\_\_

**7. OFFICERS** Please Type or Print Clearly. You Must List at Least One.

Name: Catherine Book      Name: Robert LA Pierre

Title: SECRETARY      Title: President

Address: 2423 W. Laurel Ln.      Address: 7213 N. 37<sup>th</sup> Drive

Phoenix, AZ 85029      Phoenix, AZ 85051

Date taking office: Feb. 3, 2006      Date taking office: Feb 3, 2006

Name: Stephanie L. Bowman      Name: Sue Wittke

Title: Treasurer      Title: Vice-President

Address: 7213 N. 37<sup>th</sup> Drive      Address: Po Box 67457

Phoenix, AZ 85051      Phoenix, AZ 85082

Date taking office: Feb 3, 2006      Date taking office: Feb 3, 2006

**8. DIRECTORS** Please Type or Print Clearly. You Must List at Least One.

Name: CRAIG L. DYER      Name: Catherine Book

Address: 7213 N. 37<sup>th</sup> Drive      Address: 2423 W. Laurel Ln

Phoenix, AZ 85051      Phoenix, AZ 85029

Date taking office: Feb 3, 2006      Date taking office: Feb 3, 2006

Name: Sue Wittke      Name: Gary Swaty

Address: PO Box 67457      Address: Po Box 67457

Phoenix, AZ 85082      Phoenix, AZ 85082

Date taking office: Feb 3, 2006      Date taking office: Feb 3, 2006

-0992735-7

FISCAL		MIS REPORT				
WESTERN		RESEARCH	FELTHER	ASSOCIATION	INC.	
MONTH	JAN	APRIL	JULY	OCTOBER	YEAR END	YEAR TO DATE
BALANCE	\$1,624.48	1,624.48	1,624.48	1,624.48	1,624.48	1,624.48
INCOME (A)		-47.2	-57.1	-58.2	61	-121.77
CONVENTION	JAN	APRIL	JULY	OCTOBER	YEAR END	YEAR TO DATE
BALANCE	22,824.91	22,824.91	22,824.91	22,824.91	22,824.91	22,824.91
INCOME (A)		-628.95	0	-51.94	-11,576.14	-12,257.09
TOTAL	JAN	APRIL	JULY	OCTOBER	YEAR END	YEAR TO DATE
TOTAL	\$24,449.39	24,449.39	24,449.39	24,449.39	24,449.39	24,449.39
INCOME (A)		-109.15	-57.1	-110.14	-11,515.14	-11,781.53

COMMISSIONER  
JOE RAYBURN, Chairman  
WILLIAM A. BRIDELL  
MARC SPITZBERG  
MICK WILSON  
SHEILA K. BRYAN



ARIZONA CORPORATION COMMISSION

KEVIN C. MOHR,  
Executive Director  
DAVID HUBER,  
Deputy, Corporate Division

CORPORATIONS DIVISION  
1300 West Washington  
Phoenix, Arizona 85007-2929

MYSTERY SCIENCE FICTION ASSOCIATION, INC. (MMSFASPA)  
PO BOX 67457

PROPERTY AR 25022- Effective Date: 07/14/2006  
Filed No: -0592735-7  
Original Due Date: April 15, 2006 Received: 05/12/06

We have deposited your check, however your annual report is being returned for the following reason(s):

Section 12 signature requirements are as follows:  
Corporations - the signer shall be a duly authorized officer listed in section 7 on page 2.

IMPORTANT INFORMATION

Please note: This annual report has not been approved, it is being returned to you for corrections which are listed above. If you wish to avoid additional penalties and possible administrative dissolution, this report must be returned within 30 days after the effective date of this notice to be deemed timely filed. Refer to A.R.S. 10-1622.F for more information.

To successfully process your document, it is important for you to return:

- 1) A copy of this letter.
- 2) The annual report(s) which accompanied this letter (with corrections made).
- 3) Fees or penalties if marked due.

AR: 0021  
REV. 04/2000

PLEASE PRINT NAME AND ADDRESS OF THE CORPORATION OR INDIVIDUAL WHOSE REPORT IS BEING RETURNED TO YOU FOR CORRECTIONS. IF YOU HAVE A REGISTERED OFFICE IN ARIZONA, PLEASE PRINT THAT ADDRESS AS WELL. IF YOU DO NOT HAVE A REGISTERED OFFICE IN ARIZONA, PLEASE PRINT YOUR CURRENT ADDRESS. PLEASE PRINT YOUR PHONE NUMBER. PLEASE PRINT YOUR FAX NUMBER. PLEASE PRINT YOUR E-MAIL ADDRESS. PLEASE PRINT YOUR WEBSITE ADDRESS. PLEASE PRINT YOUR SOCIAL SECURITY NUMBER. PLEASE PRINT YOUR FEDERAL IDENTIFICATION NUMBER. PLEASE PRINT YOUR STATE IDENTIFICATION NUMBER. PLEASE PRINT YOUR BUSINESS LICENSE NUMBER. PLEASE PRINT YOUR PROFESSIONAL LICENSE NUMBER. PLEASE PRINT YOUR PROFESSIONAL REGISTRATION NUMBER. PLEASE PRINT YOUR PROFESSIONAL CERTIFICATION NUMBER. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION DATE. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION SCORE. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION GRADE. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION STATUS. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION COMMENTS. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION DATE. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION SCORE. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION GRADE. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION STATUS. PLEASE PRINT YOUR PROFESSIONAL EXAMINATION COMMENTS.

**9. FINANCIAL DISCLOSURE (A.R.S. §10-11022.A.4)**

Nonprofit corporations must submit a financial statement (e.g. Income statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.

**9A. MEMBERS (A.R.S. § 10-11022.A.5)**

Only Nonprofit Corporations must answer this question.

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

**10. CERTIFICATE OF GOOD CONDUCT (A.R.S. §10-1002.A.3 & 10-11022.A.7)**

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or person controlling or holding more than 20% of the issued and outstanding common shares or 10% of any other securities, beneficial or nonbeneficial interest in the corporation been: (Uncheck portion pertains to business corporations only)

1. Convicted of a felony involving a transaction he executed, conspired, feigned or omitted 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 was 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 restraint 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.                        | 6. Date and location of birth.  |
| 2. Full birth name.                                       | 8. 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 inmates) preceding 7 year period. |   |

**11. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or PARTIAL REVOCATION (A.R.S. §10-3001.2, 10-3001.3, 10-11022)**

A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box must be marked: YES  NO

B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR (and) controlled over 20% of the issued and outstanding common shares, or 10% of any other securities, beneficial or nonbeneficial interest in any other corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?

(Uncheck portion pertains to business corporations only)

One box must be marked: YES  NO

If "Yes" in A and/or B, 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. (e.g. officer, director, trustee or major stockholder)
2. The state in which each corporation was a) incorporated b) transacted business.
3. The dates of corporate operation.
4. If any involved person (listed in #1) has been involved in any other bankruptcy proceeding within the past year, the name and address of each corporation.
5. Date, Case number and Court where the bankruptcy was filed or receiver appointed.
6. Name and address of court appointed receiver.

**12. SIGNATURES: ARTICLES BEFORE FILED AND FILED BY AT LEAST ONE CLUB OFFICER OR THEY WILL BE REJECTED.**

I declare, under penalty of law that all corporate income tax returns required by Title 45 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 certificates, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.

Name CRAIG L. DYER Date 5/20/04 Name STEPHAN L. BARNER Date 5/22/04

Signature Craig L. Dyer Signature Stephan L. Barner

Title Chairman of the Board Title General Treasurer

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