



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

AR Corp. Commission  
05186913

DUE ON OR BEFORE 06/04/2015

FILING FEE

PLEASE READ ALL INSTRUCTIONS. The following information is required by A.R.S. §§ 10-1022 & 10-1022 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) & 10-121(b). 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.

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1. The William Bronson Evangelical Association  
Eight-4-Pass-Go dba eT Corporation system  
PO Box 325 3800 N Central Ave Ste 460  
Jeffersonville, IN 47130 Phoenix AZ 85012

Business Phone: 615 256-9031 (Business phone is optional)  
State of Domicile: Arizona Type of Corporation: NON-PROFIT

2. Statutory Agent: CT CORPORATION SYSTEM Statutory Agent's Street or Physical Address, if Different:  
3800 N Central Ave Ste 460  
Phoenix AZ 85012

AGG FEE ONLY

Fee \$ \_\_\_\_\_

Penalty \$ \_\_\_\_\_

Retainer \$ \_\_\_\_\_

Expense \$ \_\_\_\_\_

Reserve \$ \_\_\_\_\_

If appointing a new statutory agent, the new agent MUST consent to this appointment by signing below. Note that the report address must be in Arizona.

(Existing or New Corporation or Related Entity company having been designated the new Statutory Agent, the newly consent to this appointment will represent or re-register 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. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

- MERCHANDISING CORPORATIONS**
- 1. Accounting
  - 2. Advertising
  - 3. Amusement
  - 4. Appliances
  - 5. Automobiles
  - 6. Banking/Finance
  - 7. Books/Conventions
  - 8. Dress/Leisure
  - 9. Entertainment
  - 10. Food/Confection
  - 11. Furniture
  - 12. Engineering
  - 13. Equipment
  - 14. General Contracting
  - 15. Health Care
  - 16. Hotel/Travel
  - 17. Insurance
  - 18. Legal Services
  - 19. Manufacturing
  - 20. Mining
  - 21. Music/Media
  - 22. Pharmaceuticals
  - 23. Publishing/Printing
  - 24. Real Estate
  - 25. Retail Sales
  - 26. Spices/Flavoring
  - 27. Sports/Recreation
  - 28. Textiles/Fabrics
  - 29. Toys/Hobby/Novelty
  - 30. Transportation
  - 31. Utilities
  - 32. Veterinary/Animal Health Care
  - 33. Other \_\_\_\_\_

- NON-PROFIT CORPORATIONS**
- 1. Charitable
  - 2. Educational
  - 3. Religious
  - 4. Civic
  - 5. Political
  - 6. Professional
  - 7. Social
  - 8. Literary
  - 9. Cultural
  - 10. Athletic
  - 11. Scientific/Research
  - 12. Hospital/Health Care
  - 13. Agricultural
  - 14. Corporation/Industry Association
  - 15. Adult/Youth
  - 16. Homeowners Association
  - 17. Professional, governmental, municipal or trade association
  - 18. Other \_\_\_\_\_

**6. 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 affirming their beneficial interest in the trust estate.

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) \_\_\_\_\_

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) \_\_\_\_\_

**6. SHAREHOLDERS:** (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.

NONE  Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Name: \_\_\_\_\_ Name: \_\_\_\_\_

**7. OFFICERS**

Name: William P Brankam Name: Mike Eplion  
 Title: President/CEO Title: Secretary  
 Address: 812 Hancock Address: 713 Plaza Drive  
Sellersburg, IN 47172 Jeffersonville, IN 47130

Date taking office: 2/25/1977 Date taking office: 5/26/2013  
 Name: Joseph Brankam Name: \_\_\_\_\_  
 Title: Vice-President Title: \_\_\_\_\_  
 Address: 208 Ewing Lane Address: \_\_\_\_\_  
Jeffersonville, IN 47130

Date taking office: 2/25/1997 Date taking office: \_\_\_\_\_

**8. DIRECTORS**

Name: Joseph Brankam Name: Paul Brankam  
 Address: 308 Ewing Lane Address: 635 Mulberry  
Jeffersonville, IN 47130 Sellersburg, IN 47172

Date taking office: 2/25/1997 Date taking office: 5/26/2013  
 Name: William P Brankam Name: Jeremy Evans  
 Address: 812 Hancock Address: 5078 Mary Morton Dr  
Sellersburg, IN 47172 Lexington, IN 47138

Date taking office: 2/25/1977 Date taking office: 5/26/2013

**9. FINANCIAL DISCLOSURE (A.R.S. §10-1182(A)(1))**

Nonprofits - If your annual report is due on or before September 25, 2008, you must attach a financial statement (e.g. income 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.

**ONLY NON-PROFIT CORPORATIONS MUST ANSWER THIS QUESTION:**

**10. MEMBERS (A.R.S. §10-1182(A)(2))**

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

**10. CERTIFICATE OF DISQUALIFICATION (A.R.S. §§ 10-302(D), 10-302(E), 10-1182(A)(2) & 10-1182(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. Convicted of a felony involving a transaction in securities, consumer fraud or default 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. 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" to A, 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 birth name.   | 5. Date and location of birth.  |
| 2. Full present name and prior names used.                      | 6. The nature and description of each conviction or judicial action; the date and location; the court and parole agency involved; and the §9 or crime number of the case. |
| 3. Present home address.  |   |
| 4. All prior addresses for immediately preceding 7 year period. |   |

B. Has any person who is currently an officer, director, trustee, incorporator, or who, in a For-profit corporation, controls or holds over 20.5% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a 20% interest in any other corporation on the bankruptcy or receivership of that other corporation?

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

If "YES" to B, the following information must be submitted as an attachment to this report for each corporation subject to the statement above.

- (a) Name and address of each corporation and the persons involved.
- (b) State(s) in which it (i) was incorporated and (ii) transacted business.
- (c) Dates of corporate operation.

**11. STATEMENT OF BANKRUPTCY OR RECEIVERSHIP (A.R.S. §§ 10-1023 & 10-1182)**

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

If "Yes" to A, the following information must be submitted as an attachment to this report:

1. All officers, directors, trustees and major stockholders of the corporation within one year of filing the petition for bankruptcy or the appointment of a receiver. If a major stockholder is a corporation, the statement shall list the current president, chairman of the board of directors and major stockholders of such corporate stockholder. "Major stockholder" means a shareholder possessing or controlling twenty per cent of the issued and outstanding shares or twenty per cent of any proprietary, beneficial or membership interest in the corporation.
2. 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) State in which it (i) was incorporated and (ii) transacted business.
  - (c) Dates of operation.

**12. 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 45 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 William P. Beasman Date 5-18-10 Name Joseph Beasman Date 05-20-10  
 Signature William P. Beasman Signature Joseph Beasman  
 Title Pres. Title VP  
 (Signature(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)