



State of Idaho

DEPARTMENT OF WATER RESOURCES

322 East Front Street, P.O. Box 83720, Boise, ID 83720-0098

Phone: (208) 287-4800 Fax: (208) 287-6700 Web Site: www.idwr.idaho.gov

April 15, 2005

DIRK KEMPTHORNE
Governor

KARL J. DREHER
Director

SHELLEY STRATE
PO BOX 1778
EAGLE ID 83616

Re: Requests for Extension of Time regarding Permit Nos. 63-12525 through 63-12531, in the name of Irving J. Ray

Dear Ms. Strate:

Enclosed are four original Requests for Extension of Time ("request(s)") you filed with the department for permits in the name of Irving J. Ray. Requests referring to permit nos. 63-12525, 63-12526 & 63-12531 are not appropriate. These three numbers refer to applications presently being reviewed for issuance of a permit. Additionally, your request for permit no. 63-12530 is not appropriate, because this permit has been assigned to the new owners Joseph & Laura Gallia. (Mr. and Mrs. Gallia have filed a request on their own behalf.) Therefore, I am returning these four requests to you. With this letter I am asking that the \$50.00 filing fee you paid for each of these requests be refunded to you. A check will be issued and mailed to you in 7-10 days.

You also filed three requests regarding permit nos. 63-12527 through 63-12529. These requests are acceptable and the department recognizes Michael Hitchcock, Vice President of Irving J. Ray, Inc. as having signatory powers for Mr. Ray. I will process these requests, assign a new proof deadline, and send a confirmation letter with a copy of the approved request to Mr. Hitchcock.

If you have any questions, please contact me at (208) 287-4942.

Sincerely,

Deborah J. Gibson
Administrative Assistant
Water Allocation Bureau

Enclosures

cc: Fiscal (re: W032794)
Regional office
Michael Hitchcock, Irving J. Ray, Inc.

From: Shelley Strate
Alpine Mortgage-Eagle Rim Properties
Strate Property Management
HELP PROGRAM
724-2501 Fax: 322-1713

TO: Debbie gibson
Fax: 287-6700
Phone: _____
RE: _____
No. of pages including cover ~~1~~ 12

Message:

Debbie - here is the legal paper work
concerning - Young Ray & Michael
Hitchcock.

Permit extensions for Chukar Point

Shelley Strate

208-322-
1713 (fax)

(602)740-3207
Michael H.

This fax is intended only for the use of the addressee and may contain confidential information. If you are not the intended recipient, you are notified that any dissemination, distribution or copying is strictly prohibited.



STATE OF ARIZONA RECEIVED OCT 21 2004
CORPORATION COMMISSION
CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE



DUE ON OR BEFORE 12/17/2004

FY04-05

FILING FEE \$45.00

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 on page 4 for proper format.

1. -0152351-4
 IRVING J. RAY, INC.
 6053 N UNIVERSITY DR
 MESA, AZ 85205-7517

*Verified w/
 Arizona
 Corporation
 Commission*

Business Phone: _____

(Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: PROFIT

2. Statutory Agent: IRVING J RAY
 Mailing Address: 6053 N UNIVERSITY DR
 City, State, Zip: MESA, AZ 85205-7517

Physical Address, if different.
 Physical Address: 615 N. Windsor
 City, State, Zip: Mesa, AZ 85203

ACC USE ONLY

Fee \$ _____

Penalty \$ _____

Reinstatement \$ _____

Expedite \$ _____

Resubmit \$ _____

Use this box only if appointing a new Statutory Agent

If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below:

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. 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/Motel
- ☐ 17. Import/Export
- ☐ 18. Insurance
- ☐ 19. Legal Services
- ☐ 20. Manufacturing
- ☐ 21. Mining
- ☐ 22. News Media
- ☐ 23. Pharmaceutical
- ☐ 24. Publishing/Printing
- ☐ 25. Ranching/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. Cemetery
- ☐ 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
- ☐ 17. Industrial or trade association
- ☐ 18. Other _____

-0154351-4 IRVING J. RAY, INC.

Page 2

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. Please examine the corporation's original Articles of Incorporation for the amount of shares authorized. 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. **Please Print or Type Clearly.**

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

1,000,000Common

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

100,000Common**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.**

Name: Irving J. RayName: Ethlyn A. RayNONE ☐

Name: _____

Name: _____

7. OFFICERS Please Type or Print Clearly. You Must List at Least One.Name: Irving J. RayName: Dale E. AndersenTitle: PresidentTitle: Vice-President/TreasurerAddress: 615 N. WindsorAddress: 6053 E. University DriveMesa, AZ 85213Mesa, AZ 85205-7517Date taking office: 12-17-1982Date taking office: 12-17-1982Name: Ethlyn A. RayName: Michael HitchcockTitle: SecretaryTitle: Vice-PresidentAddress: 615 N. WindsorAddress: 706 N. Windsor CircleMesa, AZ 85213Mesa, AZ 85213Date taking office: 12-17-1982Date taking office: 12-23-1999**8. DIRECTORS** Please Type or Print Clearly. You Must List at Least One.Name: Irving J. RayName: Dale E. AndersenAddress: 615 N. WindsorAddress: 6053 E. University DriveMesa, AZ 85213Mesa, AZ 85205-7515Date taking office: 12-17-1982Date taking office: 12-17-1982Name: Ethlyn A. Ray

Name: _____

Address: 615 N. Windsor

Address: _____

Mesa, AZ 85213Date taking office: 12-17-1982

Date taking office: _____

Please Enter Corporation Name: Irving J. Ray, Inc.File number 0152351-4

Page 3

9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9)Nonprofit corporations must attach a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.**9A. MEMBERS (A.R.S. §10-11622.A.8)**

Only Nonprofit Corporations must answer this question.

This corporation **DOES** ☐ **DOES NOT** ☐ have members.**10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.6 & 10-11622.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 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 business 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; |
| 4. Prior addresses (for immediate preceding 7 year period). | the date and location; the court and public agency involved, and the file or cause number of the case. |

11. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.D.2, 10-1623 & 10-11623)

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 held or controlled over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?

(Underlined portion pertains to business corporations only)

One box must be marked: YES ☐ NO ☒If "YES" to 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: Annual Reports must be signed and dated by at least one duly authorized officer or they 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 Dale E. Andersen Date 12-1-04 Name _____ Date _____Signature Dale E. Andersen Signature _____Title Vice-President/Treasurer Title _____

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