Filing Number:



Pursuant to A.C.A. § 2-2-422 (PLEASE TYPE OR PRINT CLEARLY IN BLACK INK)

1. Name of the Mark	eting Association:			
		:		
		during the fiscal year (Please spe		
a. If a stock as				
	apital stock:	Number of stock	cholders:	
or				
	k association:			
Number of N	Members:	Amount of membership fees i	eceived:	
Total expenses of	operations:			
5. The amount of inc	debtedness or liability:		_	
6. Include balance s	heet(s) with this annual re	eport.		
		ocument with the intent to file with a fine up to \$100.00 and/or impri	the Arkansas Secretary of State is sonment up to 30 days.	
Executed this	day of	(Month) (Year)	
	uthorizing Officer		nature of Authorizing Officer	
(Type	e or Print in Black Ink)		(Sign in Black Ink)	

Business and Commercial Services Division –

1401 W. Capitol, Suite 250, Little Rock, Arkansas 72201-1094 Phone: 501-682-3409 or Toll Free: 888-233-0325

Email: arsos@sos.arkansas.gov • Website: www.sos.arkansas.gov

No Filing Fee Rev. 9/21