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Short Form
Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2007

Open to Public
InspectionUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)► Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form
► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2007 calendar year, or tax year beginning	Jul 4	, 2007, and ending	Jun 30	, 2008
B Check if applicable				
Address change	C Name of organization			
Name change	OAKLAND JR GRIZZLIES HOCKEY CLUB			
Initial return	Number and street (or P O box, if mail is not delivered to street address)			
Termination	2864 CROFTSHIRE CT			
Amended return	Room/suite			
Application pending	(248) 643-4344			
See Specific Instructions.	F Group Exemption Number			
	►			

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts
must attach a completed Schedule A (Form 990 or 990-EZ).G Accounting method. Cash Accrual
Other (specify) ►

I Website: ► N/A	H Check ► <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
J Organization type (check only one) — <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	STATUTE UNIT RECEIVED
K Check ► <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to attach a complete return	► \$ 70,079.
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990	

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, grants, and similar amounts received	JAN 20 2012	1 19,676.
2 Program service revenue including government fees and contracts		2
3 Membership dues and assessments		3 30,195.
4 Investment income		4
5a Gross amount from sale of assets other than inventory	5a	5c
b Less cost or other basis and sales expenses	5b	
c Gain or (loss) from sale of assets other than inventory. Subtract line 5b from line 5a (attach schd)		
6 Special events and activities (attach schedule). If any amount is from gaming, check here ► <input type="checkbox"/>		
a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
b Less direct expenses other than fundraising expenses	6b	
c Net income or (loss) from special events and activities Subtract line 6b from line 6a		
7a Gross sales of inventory, less returns and allowances	7a 59,336.	7c 20,208.
b Less cost of goods sold	7b 39,128.	
c Gross profit or (loss) from sales of inventory Subtract line 7b from line 7a		
8 Other revenue (describe ►)		8
9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	RECEIVED	9 70,079.
10 Grants and similar amounts paid (attach schedule)		10
11 Benefits paid to or for members		11
12 Salaries, other compensation, and employee benefits		12
13 Professional fees and other payments to independent contractors		13
14 Occupancy, rent, utilities, and maintenance		14
15 Printing, publications, postage, and shipping		15
16 Other expenses (describe ► See Other Expenses Statement)		16 71,951.
17 Total expenses (add lines 10 through 16)		17 71,951.
18 Excess or (deficit) for the year. Subtract line 17 from line 9		18 -1,872.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19
20 Other changes in net assets or fund balances (attach explanation)		20
21 Net assets or fund balances at end of year. Combine lines 18 through 20		21 -1,872.

Part II Balance Sheets — If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.

(See Instructions)		(A) Beginning of year	(B) End of year
22 Cash, savings, and investments		0. 22	108.
23 Land and buildings		0. 23	0.
24 Other assets (describe ►)		0. 24	0.
25 Total assets		25	108.
26 Total liabilities (describe ► See L-26 Stmt)		0. 26	1,980.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		27	-1,872.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0812 12/27/07

Form 990-EZ (2007)

SCA

18/7

Part III: Statement of Program Service Accomplishments (See the instructions.)**Expenses**What is the organization's primary exempt purpose? SUPPORT AMATEUR HOCKEY, COMMUNITY SPIRIT, OAKLAND UNIVERSITY

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others.)

Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

28 SUPPORT AMATEUR HOCKEY, COMMUNITY SPIRIT, OAKLAND UNIVERSITY(Grants \$ 0.) If this amount includes foreign grants, check here ► 28a 71,951.

29

(Grants \$) If this amount includes foreign grants, check here ► 29a

30

(Grants \$) If this amount includes foreign grants, check here ► 30a

31

Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here ► 31a

32

Total program service expenses. Add lines 28a through 31a ► 32 71,951.**Part IV: List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See Instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
See List of Officers, Etc. Statement				

Part V: Other Information (Note the statement requirement in the instructions.)

Yes

No

33 Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change

33 X

34 Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes

34 X

35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

35 a

35 b N/A

36

37 a

37 b N/A

38 a

38 b N/A

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement

36 X

37 a Enter amount of political expenditures, direct or indirect, as described in the instructions

0

37 b N/A

38 a

38 b N/A

38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

39 a

39 b N/A

39 b Gross receipts, included on line 9, for public use of club facilities

Part V. Other Information (Note the statement requirement in the instructions.) (Continued)

40a 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.

	Yes	No
40b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40e	<input type="checkbox"/>	<input checked="" type="checkbox"/>

b 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach an explanation

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.

d Enter amount of tax on line 40c reimbursed by the organization ► 0.

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?

41 List the states with which a copy of this return is filed ► _____

42a The books are in care of ► TERRY BISHOP Telephone no ► (248) 643-4344
Located at ► 2864 CROFTSHIRE CT ROCHESTER HILLS MI ZIP + 4 ► 48306

	Yes	No
42b	<input checked="" type="checkbox"/>	<input type="checkbox"/>
42c	<input type="checkbox"/>	<input checked="" type="checkbox"/>

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

If 'Yes,' enter the name of the foreign country ► _____

See the instructions for exceptions and filing requirements for Form TD F 90-22.1.

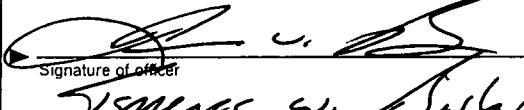
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

If 'Yes,' enter the name of the foreign country. ► _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **43** **N/A**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Please Sign Here


Signature of officer
► Joseph W. Galasso
Type or print name and title
PRESIDENT

1/10/12
Date

Paid Preparer's Use Only

Preparer's signature ► <u>Joseph P. Galasso, Jr.</u>	Date <u>11/08/11</u>	Check if self-employed ► <input type="checkbox"/>	Preparer's SSN or PTIN (See General Instruction X)
Firm's name (or yours if self-employed), address, and ZIP + 4 ► <u>GALASSO PC</u> ► <u>30685 BARRINGTON ST STE 120</u> ► <u>MADISON HEIGHTS</u>	<u>MI 48071-5109</u>	EIN ►	Phone no ► <u>(248) 588-2800</u>

BAA

TEEA0812 12/27/07

Form 990-EZ (2007)

SCHEDULE A
(Form 990 or 990-EZ)**Organization Exempt Under
Section 501(c)(3)**

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

2007

Name of the organization

OAKLAND JR GRIZZLIES HOCKEY CLUB

Employer identification number

26-0530882**Part I-A Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	►	None		

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	►	None

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services	►	None

Part III Statements About Activities (See instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities. ► \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1	X
2	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)		
2a	a Sale, exchange, or leasing of property?	2a	X
2b	b Lending of money or other extension of credit?	2b	X
2c	c Furnishing of goods, services, or facilities?	2c	X
2d	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
2e	e Transfer of any part of its income or assets?	2e	X
3a	3a Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a	X
3b	b Did the organization have a section 403(b) annuity plan for its employees?	3b	X
3c	c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' attach a detailed statement	3c	X
3d	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X
4a	4a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g. If 'No,' complete lines 4f and 4g	4a	X
4b	b Did the organization make any taxable distributions under section 4966?	4b	X
4c	c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	X
d	d Enter the total number of donor advised funds owned at the end of the tax year ► _____		
e	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____		
f	f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► _____ 0		0
g	g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____ 0 .		0 .

Part IV Reason for Non-Private Foundation Status (See instructions.)

I certify that the organization is not a private foundation because it is. (Please check only **ONE** applicable box.)

5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)

8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state ►** _____

10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 An organization that normally receives **(1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2).** (Also complete the **Support Schedule** in Part IV-A.)

13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(2). Check the box that describes the type of supporting organization: ►

Provide the following information about the supported organizations. (See instructions.)

An organization organized and operated to test for public safety. Section 509(a)(4) (See instructions.)

BAA

Schedule A (Form 990 or 990-EZ) 2007

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.***Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	0.				0.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose					
18 Gross income from interest, dividends, amts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	0.				0.
24 Line 23 minus line 17	0.				0.
25 Enter 1% of line 23	0.				

26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24

► 26a

Part V Private School Questionnaire (See instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

	Yes	No
29		
30		
31		

30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?

If 'Yes,' please describe; if 'No,' please explain (If you need more space, attach a separate statement.)

32 Does the organization maintain the following:

- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)

33 Does the organization discriminate by race in any way with respect to:

- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?

If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)

34a Does the organization receive any financial aid or assistance from a governmental agency?

34a		
34b		

b Has the organization's right to such aid ever been revoked or suspended?

If you answered 'Yes' to either 34a or b, please explain using an attached statement.

35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If 'No,' attach an explanation.

35		

Part VI-A: Lobbying Expenditures by Electing Public Charities (See instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check ► a if the organization belongs to an affiliated group. Check ► b if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures

(The term 'expenditures' means amounts paid or incurred)

36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37) ..	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table —		
If the amount on line 40 is —		The lobbying nontaxable amount is —	
Not over \$500,000	. 20% of the amount on line 40 .	41	
Over \$500,000 but not over \$1,000,000	. \$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	. \$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	. \$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	. \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.			

4 -Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots non-taxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B: Lobbying Activity by Nonelecting Public Charities

Lobbying Activity by Nonfiling Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

a Volunteers
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
c Media advertisements
d Mailings to members, legislators, or the public
e Publications, or published or broadcast statements
f Grants to other organizations for lobbying purposes
g Direct contact with legislators, their staffs, government officials, or a legislative body
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
i Total lobbying expenditures (add lines **c** through **h**)

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII: Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51 a (i)		X
a (ii)		X
b (i)		X
b (ii)		X
b (iii)		X
b (iv)		X
b (v)		X
b (vi)		X
c		X

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? _____.

► Yes No

b If 'Yes,' complete the following schedule:

OAKLAND JR. GRIZZLIES HOCKEY CLUB

Reason for filing

The organization wants to establish the charitable purpose and disclosed financial results to maintain charitable not for profit status.

Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)

TOURNAMENTS	32,285.
COACHING	27,861.
ADVERTISING	5,994.
LOCKER ROOM MAINT	1,151.
SUPPLIES	568.
BANK FEES	58.
ICE FEES	2,874.
MISC	1,160.
Total	<u>71,951.</u>

Form 990-EZ, Page 2, Part IV

List of Officers, Etc. Statement

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> TERRY BISHOP 3864 CROFTSHIRE CT ROCHESTER HILLS MI 48306	PRESIDENT 10.00	0.	0.	0.
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> PJ ANDARY 48599 PENROSE MACOMB MI 48044	VICE PRES 10.00	0.	0.	0.
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> MARK HELZER 3797 SENEY DR LAKE ORION MI 48360	SECRETARY 10.00	0.	0.	0.
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> TERRY BISHOP 2864 CROFTSHIRE CT ROCHESTER HILLS MI 48306	DIRECTOR 1.00	0.	0.	0.
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> DAN WILHELM 668 SPRINGVIEW ROCHESTER MI 48307	DIRECTOR 1.00	0.	0.	0.
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> PJ ANDARY 48599 PENROSE MACOMB MI 48044	DIRECTOR 1.00	0.	0.	0.
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> MARK HELZER 3797 SENEY DR LAKE ORION MI 48360	DIRECTOR 1.00	0.	0.	0.

Form 990-EZ, Page 1, Part II, Line 26

Total Liabilities Statement

Line 26 - Total Liabilities:	Beginning of Year	End of Year
<u>LOAN PAYABLE - T. BISHOP</u>		<u>1,980.</u>
Total		<u>1,980.</u>