



Preserving the Western Lifestyle & Keeping the Sport of Rodeo Alive in the Nevada LGBTQ Community

NEVADA GAY RODEO

STATE OF NEVADA BUSINESS LICENSE

The Nevada Gay Rodeo Association is an all-volunteer, nonprofit 501(c)(3) organization dedicated to preserving the western lifestyle and producing gay rodeos to raise funds for charitable organizations within our community.

STATE OF NEVADA

BARBARA K. CEGAVSKE

Secretary of State



**OFFICE OF THE
SECRETARY OF STATE**

Commercial Recordings Division

202 N. Carson Street

Carson City, NV 89701

Telephone (775) 684-5708

Fax (775) 684-7138

North Las Vegas City Hall

2250 Las Vegas Blvd North, Suite 400

North Las Vegas, NV 89030

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KIMBERLEY PERONDI

Deputy Secretary for

Commercial Recordings

Business Entity - Filing Acknowledgement

05/30/2022

Work Order Item Number: W2022053000653 - 2156398

Filing Number: 20222354287

Filing Type: Annual List

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Indexed Entity Information:

Entity ID: C6598-1992

Entity Name: NEVADA GAY RODEO
ASSOCIATION (N.G.R.A.)

Entity Status: Active

Expiration Date: None

Non-Commercial Registered Agent

GUY PUGLISI

1560 EMERALD OAKS AVE, Henderson, NV 89014, USA

The attached document(s) were filed with the Nevada Secretary of State, Commercial Recording Division. The filing date and time have been affixed to each document, indicating the date and time of filing. A filing number is also affixed and can be used to reference this document in the future.

Respectfully,

A handwritten signature in black ink that reads "Barbara K. Cegavske".

BARBARA K. CEGAVSKE
Secretary of State



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Annual or Amended List and State Business License Application

ANNUAL **AMENDED** (check one)

List of Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

NEVADA GAY RODEO ASSOCIATION (N.G.R.A.)
 NAME OF ENTITY

NV19921043412
 Entity or Nevada Business
 Identification Number (NVID)

TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT

IMPORTANT: Read instructions before completing and returning this form.

Please indicate the entity type (check only one):

Corporation
 This corporation is publicly traded, the Central Index Key number is:

Nonprofit Corporation (see nonprofit sections below)

- Limited-Liability Company
- Limited Partnership
- Limited-Liability Partnership
- Limited-Liability Limited Partnership
- Business Trust
- Corporation Sole

Additional Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers, may be listed on a supplemental page.

<p><u>CHECK ONLY IF APPLICABLE</u></p> <p>Pursuant to NRS Chapter 76, this entity is exempt from the business license fee.</p> <p><input type="checkbox"/> 001 - Governmental Entity</p> <p><input type="checkbox"/> 006 - NRS 680B.020 Insurance Co, provide license or certificate of authority number <input style="width: 150px;" type="text"/></p>
<p>For nonprofit entities formed under NRS chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below.</p> <p><input type="checkbox"/> Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee. Exemption Code 002</p>
<p>For nonprofit entities formed under NRS Chapter 81: entities which are Unit-owners' association or Religious, Charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C § 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls under one of these categories by marking the appropriate box. If the entity does not fall under either of these categories please submit \$200.00 for the state business license.</p> <p><input type="checkbox"/> Unit-owners' Association <input type="checkbox"/> Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. §501(c)</p>
<p>For nonprofit entities formed under NRS Chapter 82 and 80: Charitable Solicitation Information - check applicable box</p> <p>Does the Organization intend to solicit charitable or tax deductible contributions?</p> <p><input type="checkbox"/> No - no additional form is required</p> <p><input checked="" type="checkbox"/> Yes - the "Charitable Solicitation Registration Statement" is required.</p> <p><input type="checkbox"/> The Organization claims exemption pursuant to NRS 82A 210 - the "Exemption From Charitable Solicitation Registration Statement" is required</p> <p style="text-align: center;">**Failure to include the required statement form will result in rejection of the filing and could result in late fees.**</p>



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Annual or Amended List and State Business License Application - Continued

Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

CORPORATION, INDICATE THE <u>SECRETARY</u> :			
BRIAN SHIELDS		USA	
Name		Country	
PO BOX 94983	LAS VEGAS	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u>PRESIDENT</u> :			
KATHY ALDAY		USA	
Name		Country	
PO BOX 94983	LAS VEGAS	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u>TREASURER</u> :			
DAVID HERING		USA	
Name		Country	
PO BOX 94983	LAS VEGAS	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u>DIRECTOR</u> :			
JEFFREY NEAL		USA	
Name		Country	
PO BOX 94983	LAS VEGAS	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u>DIRECTOR</u> :			
DAVID BOLAND		USA	
Name		Country	
PO BOX 94983	LAS VEGAS	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u>DIRECTOR</u> :			
STEWART BLACK		USA	
Name		Country	
PO BOX 94983	Las Vegas	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u> </u> :			
GUY PUGLISI		USA	
Name		Country	
PO BOX 94983	Las Vegas	NV	89193
Address	City	State	Zip/Postal Code
CORPORATION, INDICATE THE <u>DIRECTOR</u> :			

ROBERT FLEMING

USA

Name

Country

PO Box 94983

Las Vegas

NV

89193

Address

City

State

Zip/Postal Code

CORPORATION, INDICATE THE DIRECTOR:

JASON DYER

USA

Name

Country

PO Box 94983

Las Vegas

NV

89193

Address

City

State

Zip/Postal Code

None of the officers and directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X David Hering

Treasurer

05/30/2022

Title

Date

**Signature of Officer, Manager, Managing Member,
General Partner, Managing Partner, Trustee,
Subscriber, Member, Owner of Business,
Partner or Authorized Signer** *FORM WILL BE RETURNED IF*

UNSIGNED