

# ETHERIEDGE & ASSOCIATES, PC

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## ANNUAL CHECK-UP QUESTIONNAIRE (Corporation)

Please complete questionnaire and return to our office via mail or facsimile.

Date: \_\_\_\_\_ FAX: \_\_\_\_\_

Corporate name: \_\_\_\_\_ C or S Corp.?: \_\_\_\_\_

EIN: \_\_\_\_\_ Date of Incorp.: \_\_\_\_\_

State of Incorp.: \_\_\_\_\_ Year of Incorp.: \_\_\_\_\_

Primary Contact name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: Main: \_\_\_\_\_ Cell : \_\_\_\_\_

Email Address: \_\_\_\_\_

Principal Address: \_\_\_\_\_ County: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Bank Affiliation: \_\_\_\_\_

CPA name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Agent name: \_\_\_\_\_ Phone: \_\_\_\_\_

Other key advisor(s): \_\_\_\_\_

Has the corporation filed the current year annual registration with the Secretary of State?

Yes \_\_\_\_\_ No \_\_\_\_\_

Names, number of shares & addresses of shareholders:

Name:	Number of Shares:	Address:
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Have there been any changes in the ownership or number of shares in the corporation? If so, provide details: \_\_\_\_\_

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Have there been any loans made between the corporation and any shareholder, director or officer? If so, provide details: \_\_\_\_\_

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If there is a stock purchase agreement requiring a periodic evaluation of stock, provide the current aggregate value, the value per share, and the effective date of such evaluation:

Current Aggregate Value:

Value per Share:

Effective Date:

\_\_\_\_\_

Names & addresses of directors to be elected for the coming year:

Name:

Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Any directors whose terms are not expiring? If yes, provide names: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Names & addresses of officers to be elected for the coming year:

Name/Title:

Address:

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Provide annual salaries for each officer for the coming year:

Name/Title:

Annual salary:

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Any bonuses paid during the past fiscal year? If so, provide name, title and amount:

Name/Title:

Amount:

_____	_____
_____	_____
_____	_____
_____	_____

If the corporation adopted insurance or other employee benefit programs for which no minutes have been executed, provide details:

Type of Benefit:

Effective Date:

_____	_____
_____	_____

If the corporation entered into any real property purchases or leases, or significant equipment purchases or leases, for which no minutes were executed, provide details and copies of relevant purchase or lease documents.

If the corporation entered into any significant agreements or transactions for which no minutes were executed, provide details and copies of any such agreements or transaction documents.

Have there been any major changes in the corporation's purposes or policies? If so, provide details:

Are there any desired amendments to the corporation's bylaws or articles of incorporation?

If there are any other items you think are of significance and should be incorporated in the minutes, provide details:

Other comments or concerns: