



# STATE OF ARIZONA CORPORATION COMMISSION



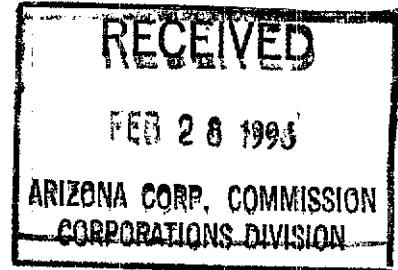
## NONPROFIT CORPORATION ANNUAL REPORT & CERTIFICATE OF DISCLOSURE FOREIGN / DOMESTIC

FOR FISCAL YEAR ENDING 12/31/1995

DUE ON OR BEFORE 04/15/1996

The following information is required by A.R.S. §10-1081 for all domestic and foreign nonprofit corporations authorized to conduct affairs in Arizona. The Commission's authority to prescribe this form is A.R.S. §10-1092. MAKE CHANGES OR CORRECTIONS WHERE NECESSARY.

Corporation File: -0083623-0  
 Corporation Name: THE LAKES COMMUNITY ASSOCIATION  
 Address: 5501 LAKESHORE DR



City, State, Zip: TEMPE AZ 85283-  
 Domicile: ARIZONA  
 Type: NON-PROFIT

Arizona Statutory Agent: DONALD E DYKMAN  
 Street Address: 6750 E CAMELBACK RD #104  
 (NOT P.O. BOX)

City, State, Zip: SCOTTSDALE AZ 85051-

1. Check the one category below which best describes the CHARACTER OF AFFAIRS conducted by your corporation in Arizona.

- |   |   |   |
|---|---|---|
| 1. <input type="checkbox"/> Charitable  | 8. <input type="checkbox"/> Social                | 15. <input type="checkbox"/> Agricultural   |
| 2. <input type="checkbox"/> Benevolent  | 9. <input type="checkbox"/> Fraternal             | 16. <input type="checkbox"/> Horticultural  |
| 3. <input type="checkbox"/> Educational | 10. <input type="checkbox"/> Literary             | 17. <input type="checkbox"/> Animal Husbandry   |
| 4. <input type="checkbox"/> Civic       | 11. <input type="checkbox"/> Cultural             | 18. <input checked="" type="checkbox"/> Homeowners' Association                         |
| 5. <input type="checkbox"/> Patriotic   | 12. <input type="checkbox"/> Athletic             | 19. <input type="checkbox"/> Professional, commercial, industrial, or trade association |
| 6. <input type="checkbox"/> Political   | 13. <input type="checkbox"/> Science/Research     | 20. <input type="checkbox"/> Other  |
| 7. <input type="checkbox"/> Religious   | 14. <input type="checkbox"/> Hospital/Health Care |   |

ACC USE ONLY	
Fee	\$ _____
Penalty	\$ _____
Total	\$ _____

2. NUMBER OF EMPLOYEES: Please check one. (For statistical purposes only.)

25 or Less       26 - 100 \_\_\_\_\_      101 - 500 \_\_\_\_\_      Over 500 \_\_\_\_\_

3. *If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below and PRESIDENT or VICE PRESIDENT must sign page 4 of this report.*

*I, (individual) or We, (corporation) having been designated the new Statutory Agent, do hereby consent to this appointment until my removal or resignation pursuant to law.*

\_\_\_\_\_  
 Statutory Agent Name  
 \_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 City, State, Zip

4. Foreign Corporations list Address in Domicile Jurisdiction:

\_\_\_\_\_  
 Street/P. O. Box      City, State, (Country) Zip

-- PLEASE MAKE CORRECTIONS ON A SEPARATE SHEET --

5. **OFFICERS** (If no changes since last report, check here  and go on to Section 6.)

**PRESIDENT:** CAL GOURLEY

Address: 5602 S CROWSNEST

TEMPE, AZ 85283-

Date taking office: 02-08-93

**SECRETARY:** DORIS CRAWFORD

Address: 5610 S DOUBLOON

TEMPE, AZ 85283-

Date taking office: 02-08-93

**VICE PRESIDENT:** JUDY COHN

Address: 1416 E WHALERS WAY

TEMPE, AZ 85283-

Date taking office: 02-08-93

**TREASURER:** KEN DONOVAN

Address: 5631 S OUTRIGGER

TEMPE, AZ 85283-

Date taking office: 02-08-93

6. **DIRECTORS** (If no changes since last report, check here  and go on to Section 7.)

**NAME:** TREVOR SUTTON

Address: 5616 S PIRATES COVE

TEMPE, AZ 85283-

Date taking office: 02-08-93

**NAME:** JOSEPH CORABI

Address: 5320 S MARINE

TEMPE, AZ 85283-

Date taking office: 02-08-93

**NAME:** DENIS LA FORCE

Address: 5619 S CROWSNEST

TEMPE, AZ 85283-

Date taking office: 02-08-93

**NAME:** PATRICIA HALET

Address: 1321 E COMMODORE

TEMPE, AZ 85283-

Date taking office: 02-08-93

**LAKES COMMUNITY ASSOCIATION  
BOARD OF DIRECTORS 1995-1996**

KEN DONOVAN (SUSAN)                      PRESIDENT  
5631 S. OUTRIGGER

ALICIA KINDGREN (NILS)                  VICE PRESIDENT  
5615 S. ROCKY POINT

MARY HEROLD (EDWARD)                  SECRETARY  
5619 S. SPYGLASS

KEN OLIVER (RAYE)                      TREASURER  
5639 S. OUTRIGGER

~~PETE FUMUSA (HELEN)~~  
5520 S. JOLLY ROGER

MAUREEN HARRISON (VAN)  
5519 S. COMPASS

JUDY COHN (LEE)  
1416 E. WHALERS WAY

CHUCK OLSON  
921 E. LAMPLIGHTER LN.

PAT HULET  
938 E. LOBSTER TRAP

FRED GALLOW  
946 E. MORNINGSTAR

DUANE CHARLTON  
1144 E. DRIFTWOOD

BILL MERCER (BARB)  
1024 E. DRIFTWOOD

TELEPHONE TREE

All of the above took office 2/95

DIRECTOR

THE LAKES COMMUNITY ASSOCIATION

BALANCE SHEETS, DECEMBER 31, 1995 AND 1994

	<u>Funds</u>		<u>Total</u>	
	<u>Operating</u>	<u>Replacement</u>	<u>1995</u>	<u>1994</u>
<b>CURRENT ASSETS:</b>				
Cash	\$ 78,131	\$369,884	\$448,015	\$310,111
Members' assessments receivable	31,752		31,752	36,894
Accounts receivable (Note 4)	2,452	1,095	3,547	1,216
Due from other fund		12,000	12,000	555
Inventory	1,599		1,599	2,099
Prepaid expenses	3,500		3,500	2,206
<b>Total current assets</b>	<u>117,434</u>	<u>382,979</u>	<u>500,413</u>	<u>353,081</u>
<b>PROPERTY AND EQUIPMENT (NOTE 2):</b>				
Building improvements	49,087	109,681	158,768	160,699
Furniture and fixtures	27,635	86,954	114,589	140,306
Machinery and tools	25,453	38,221	63,674	57,641
Vehicles	9,117	11,869	20,986	26,696
Walls and fences	38,126	78,659	116,785	116,785
<b>Total</b>	<u>149,418</u>	<u>325,384</u>	<u>474,802</u>	<u>502,127</u>
Less accumulated depreciation	<u>111,717</u>	<u>112,258</u>	<u>223,975</u>	<u>234,902</u>
<b>Property and equipment - net</b>	<u>37,701</u>	<u>213,126</u>	<u>250,827</u>	<u>267,225</u>
	<u>1,654</u>		<u>1,654</u>	<u>-</u>
<b>DEPOSITS</b>				
<b>TOTAL</b>	<u>\$ 156,789</u>	<u>\$596,105</u>	<u>\$752,894</u>	<u>\$620,306</u>
	<u>LIABILITIES AND FUND BALANCE</u>			
<b>CURRENT LIABILITIES:</b>				
Accounts payable - Trade	\$ 20,443	\$ 6,064	\$ 26,507	\$ 18,066
Due to other fund	12,000		12,000	555
Accrued liabilities and other	3,667		3,667	4,328
Members' assessments received in advance	66,231		66,231	66,539
<b>Total current liabilities</b>	<u>102,341</u>	<u>6,064</u>	<u>108,405</u>	<u>89,488</u>
<b>FUND BALANCE:</b>				
Contributed by developer (Note 2)	382,604		382,604	382,604
Operating fund (deficit)	(328,156)		(328,156)	(314,917)
Replacement fund		590,041	590,041	463,131
<b>Total fund balance</b>	<u>54,448</u>	<u>590,041</u>	<u>644,489</u>	<u>530,818</u>
<b>TOTAL</b>	<u>\$ 156,789</u>	<u>\$596,105</u>	<u>\$752,894</u>	<u>\$620,306</u>

See Accompanying Notes and Auditor's Report.

**8.A. CERTIFICATE OF DISCLOSURE (A.R.S. §10-1084)**

Has any person serving either by election or appointment as officers, directors, trustees, or incorporators:

- 1. Been 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. Been 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. Been 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:

- (a) involved the violation of fraud or registration provisions of the securities laws of that jurisdiction, or
- (b) involved the violation of the consumer fraud laws of that jurisdiction, or
- (c) involved the violation of the antitrust or restraint of trade laws of that jurisdiction?

YES \_\_\_\_\_

NO X

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; the date and location; the court and public agency involved, and the file or cause number of the case. |
| 4. Prior addresses (for immediate preceding 7 year period). |   |

**8.B. STATEMENT OF BANKRUPTCY (A.R.S. §10-1083)**

Are you currently in federal bankruptcy proceedings, and if so, under which chapter of federal bankruptcy law is the action filed and on what date?

Yes \_\_\_\_\_ Chapter \_\_\_\_\_ Date Filed \_\_\_\_\_ Case Number \_\_\_\_\_ No X

9. This report must be executed by the corporation and attested by its president, a vice-president, secretary, assistant secretary or treasurer. (If the corporation is in the hands of a receiver or trustee, it shall be executed on behalf of the corporation.)

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.

By [Signature] Date 2-15-96 By X [Signature] Date 2-13-96  
 Title President Title Secretary