



EXTENDED
STATE OF ARIZONA
CORPORATION COMMISSION



BUSINESS CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE
DOMESTIC

FOR FISCAL YEAR ENDING 12/31/1995 DUE ON OR BEFORE 10/15/1996

The following information is required by A.R.S. §10-125 for all general corporations organized for profit, professional corporations, and business trusts authorized to transact business in Arizona. The Commission's authority to prescribe this form is A.R.S. §10-142. MAKE CHANGES OR CORRECTIONS WHERE NECESSARY.

Corporation File: 0086254-7
 Corporation Name: THE MEADOWS HOMEOWNERS' ASSOCIATION
 Address: 6644 EAST CALLE ALGERIA

RECEIVED

RECEIVED

OCT 16 1996

City, State, Zip: TUCSON, AZ 85715

Domicile: AZ

Type: ~~PROFIT~~ NON-PROFIT

NOV 04 1996

Arizona Statutory Agent:

Street Address:

*** (NOT P.O. BOX)

ARIZONA CORP. COMMISSION
 CORPORATIONS DIVISION

ARIZONA CORP. COMMISSION
 CORPORATIONS DIVISION

City, State, Zip:

1. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation in Arizona.

- | | | |
|---|---|--|
| <input type="checkbox"/> 1. Accounting | <input type="checkbox"/> 16. General Consulting | <input type="checkbox"/> 31. Restaurant/Bar |
| <input type="checkbox"/> 2. Advertising | <input type="checkbox"/> 17. Health Care | <input type="checkbox"/> 32. Retail Sales |
| <input type="checkbox"/> 3. Aerospace | <input type="checkbox"/> 18. Hotel/Motel | <input type="checkbox"/> 33. Science/Research |
| <input type="checkbox"/> 4. Agriculture | <input type="checkbox"/> 19. Import/Export | <input type="checkbox"/> 34. Sports/Sporting Events |
| <input type="checkbox"/> 5. Architecture | <input type="checkbox"/> 20. Insurance | <input type="checkbox"/> 35. Tax Services |
| <input type="checkbox"/> 6. Attorneys at Law | <input type="checkbox"/> 21. Legal Services | <input type="checkbox"/> 36. Technology (Computer) |
| <input type="checkbox"/> 7. Banking/Finance | <input type="checkbox"/> 22. Manufacturing | <input type="checkbox"/> 37. Technology (General) |
| <input type="checkbox"/> 8. Barbers/Cosmetology | <input type="checkbox"/> 23. Medicine/Dentistry | <input type="checkbox"/> 38. Television/Radio |
| <input type="checkbox"/> 9. Construction | <input type="checkbox"/> 24. Mining | <input type="checkbox"/> 39. Tourism/Convention Services |
| <input type="checkbox"/> 10. Contractor | <input type="checkbox"/> 25. News Media | <input type="checkbox"/> 40. Transportation |
| <input type="checkbox"/> 11. Credit/Collection | <input type="checkbox"/> 26. Pharmaceutical | <input type="checkbox"/> 41. Utilities |
| <input type="checkbox"/> 12. Education | <input type="checkbox"/> 27. Publishing/Printing | <input type="checkbox"/> 42. Veterinary Medicine/
Animal Care |
| <input type="checkbox"/> 13. Engineering | <input type="checkbox"/> 28. Ranching/Livestock | <input type="checkbox"/> 43. Other _____ |
| <input type="checkbox"/> 14. Entertainment | <input checked="" type="checkbox"/> 29. Real Estate | |
| <input type="checkbox"/> 15. Farming | <input type="checkbox"/> 30. Resort | |

12/94

ACC USE ONLY	
Fee	\$ <u>EXT</u>
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 and PRESIDENT ~ ~
 ~ ~ or VICE PRESIDENT must sign 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.

Dwight W. Connely *DW Connely*
 Statutory Agent Name
Dwight W. Connely
 Signature

3056 N. Country Club Road ***
 Address
 Tucson, Arizona 85716
 City, State, Zip

4. CAPITALIZATION: (NOTE: Business Trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate.)

Number of Shares Authorized	Class	Series	Par Value
N/A			
Number of Shares Issued	Class	Series	Par Value
N/A			

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

PRESIDENT: MARK MACREA

Address: 1979-C N CAMINO SERNA
TUCSON, AZ 85715

VICE PRESIDENT: YVONNE CALDWELL

Address: 6556-D E CALLE LA PAZ
TUCSON, AZ 85715

Date taking office: 06/01/96

Date taking office: 02/01/95

SECRETARY: PATSY JUNE

Address: 6702-A E CALLE LA PAZ
TUCSON, AZ 85715

TREASURER: _____

Address: _____

Date taking office: 02/01/96

Date taking office: ___/___/___

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

NAME: JAMES WEBB

Address: 6755-C E CALLE LA PAZ
TUCSON, AZ 85715

NAME: JEAN WILCOX

Address: 6641-A E CALLE LA PAZ
TUCSON, AZ 85715

Date taking office: 11/01/93

Date taking office: 04/01/96

NAME: _____

NAME: _____

Address: _____

Address: _____

Date taking office: ___/___/___

Date taking office: ___/___/___

7. SHAREHOLDERS of record holding more than 20% of any class of shares issued by the corporation or having more than 20% beneficial interest in the corporation. If none, so state.

(If no changes since last report, check here ___ and go on to Section 8.)

NAME _____

NAME _____

NAME _____

NAME _____

~ ~ Attach Additional Sheets if Necessary ~ ~

0086254-7

Schedule L	Balance Sheets	Beginning of tax year		End of tax year	
		(a)	(b)	(c)	(d)
Assets					
1	Cash			37,606	136,865
2a	Trade notes and accounts receivable				37,606
b	Less allowance for bad debts	()			2,708
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities (see instructions)				
6	Other current assets (attach sch.)				
7	Loans to stockholders				
8	Mortgage and real estate loans				
9	Other investments (attach sch.)			47,898	
10a	Buildings and other depreciable assets			36,815	11,083
b	Less accumulated depreciation	()			
11a	Depletable assets				
b	Less accumulated depletion	()			
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)				
b	Less accumulated amortization	()			1,258
14	Other assets (attach schedule)		0		189,520
15	Total assets				
Liabilities and Stockholders' Equity					
16	Accounts payable				26,469
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (attach sch.)				17,439
19	Loans from stockholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (attach sch.)				
22	Capital stock: a Preferred stock				
	b Common stock				
23	Paid-in or capital surplus				
24	Retained earnings - Appropriated		152,502		145,612
25	Retained earnings - Unappropriated				()
26	Less cost of treasury stock				
27	Total liabilities and stockholders' equity		152,502		189,520

Accountant's Compilation Report

September 16, 1996

I have compiled the Balance Sheets (schedule L) of The Meadows Homeowners' Association as of December 31, 1995 and 1994, included in the accompanying prescribed form in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

My compilation was limited to presenting in the form prescribed by the Arizona Corporation Commission information that is the representation of management. I have not audited or reviewed the financial statements referred to above and accordingly, do not express an opinion or any other form of assurance on them.

The financial statements are presented in accordance with the requirements of the Arizona Corporation Commission, which differ from generally accepted accounting principles and do not include all the disclosures required by generally accepted accounting principles. Accordingly, these financial statement are not designed for those who are not informed about such differences.

Respectfully submitted

THOMAS G. REX, CPA
 THOMAS G. REX, CPA
 Tucson, AZ

THE MEADOWS HOMEOWNERS' ASSOCIATION

8.A. CERTIFICATE OF DISCLOSURE (A.R.S. § 10-128)

Has any person serving either by election or appointment as officers, directors, trustees, incorporators and persons controlling or holding more than 10% of the issued and outstanding common shares or 10% of any other proprietary, beneficial or membership interest in the corporation:

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.

2. Full birth name.

3. Present home address.

4. Prior addresses (for immediate preceding 7 year period).

5. Date and location of birth.

6. Social Security Number

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.

9.B. STATEMENT OF BANKRUPTCY (A.R.S. § 10-128.01)

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

10. This report must be executed by the corporation and attested by it's 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 10/15/96 By [Signature] Date 10-15-96
Title Vice President Title Board Secretary