



STATE OF ARIZONA CORPORATION COMMISSION



NONPROFIT CORPORATION ANNUAL REPORT & CERTIFICATE OF DISCLOSURE FOREIGN / DOMESTIC

FOR FISCAL YEAR ENDING 12/31/1996

DUE ON OR BEFORE 04/15/1997

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: -0088734-4
Corporation Name: CASA DEL MONTE, INC.
Address: 4525 N 66TH ST

City, State, Zip: SCOTTSDALE AZ 85251-
Domicile: ARIZONA
Type: NON-PROFIT

Arizona Statutory Agent: PETER WHEELER REISS
Street Address: 6733 E EXETER BLVD
(NOT P.O. BOX)

City, State, Zip: SCOTTSDALE AZ 85251-

RECEIVED
MAR 14 1997
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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

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

PAID

ACC USE ONLY	
Fee	\$ _____
Penalty	\$ _____
Total	\$ <u>10</u>

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

Address

Signature

City, State, Zip

4. Foreign Corporations list Address in Domicile Jurisdiction:

Street/P. O. Box

City, State, (Country) Zip

PRESIDENT: _____ VICE PRESIDENT: ROBERT LAIDLAW
Address: _____ Address: 4525 N 66TH ST UNIT 19
SCOTTSDALE, AZ 85251-

Date taking office: _____ Date taking office: 00-00-00

SECRETARY: NEB KEETON TREASURER: NEB KEETON
Address: 4525 N 66TH ST UNIT 63 Address: 4525 N 66TH ST UNIT 63
SCOTTSDALE, AZ 85251- SCOTTSDALE, AZ 85251-

Date taking office: 00-00-00 Date taking office: 00-00-00

SEE ATTACHED SHEET

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

NAME: ROBERT RUSH NAME: BOB SCHAEFER
Address: 4525 N 66TH ST UNIT 74 Address: 4525 N 66TH ST UNIT 45
SCOTTSDALE, AZ 85251- SCOTTSDALE, AZ 85251-

5. DATE taking office: 05-18-94 Date taking office: 00-00-00

NAME: JIM MILLIKEN NAME: _____
PRESIDENT: Address: 4525 N 66TH ST UNIT 49 Address: _____
Address: SCOTTSDALE, AZ 85251- Address: _____

Date taking office: 00-00-00 Date taking office: _____

Date taking office: _____ Date taking office: _____

SECRETARY: SEE ATTACHED SHEET TREASURER: _____
Address: _____ Address: _____

Date taking office: _____ Date taking office: _____

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

5. OFFICERS

PRESIDENT: Jim Milliken
Address: 4525 N. 66rd St. #60
Scottsdale, AZ 85251

Vice President: Bob Rush
Address: 4525 N. 66th St. Unit 74
Scottsdale, AZ 85251

Date taking office: 04/02/96

Date taking office: 04/02/96

SECRETARY: Sam Halpern
Address: 4525 N. 66th St Unit 47
Scottsdale, AZ 85251

TREASURER: Sam Halpern
Address: 4525 N. 66th St Unit 47
Scottsdale, AZ 85251

Date taking office: 04/02/96

Date taking office: 04/02/96

6. DIRECTORS

NAME: Jim Milliken
Address: 4525 N. 66th St. Unit 60
Scottsdale, AZ 85251

NAME: Sam Halpern
Address: 4525 N. 66th St. Unit 47
Scottsdale, AZ 85251

Date taking office: 04/03/95

Date taking office: 04/02/96

NAME: Bob Laidlaw
Address: 8525 N. 66th St. Unit 19
Scottsdale, AZ 85251

NAME: Neb Keeton
Address: 4525 N. 66th St. Unit 63
Scottsdale, AZ 85251

Date taking office: 04/04/94

Date taking office: 04/03/95

NAME: Bob Rush
Address: 4525 N. 66th St Unit 74
Scottsdale, AZ 85251

NAME: Anne Wendell
Address: 4525 N. 66th St. Unit 34
Scottsdale, AZ 85251

Date taking office: 04/03/95

Date taking office: 04/02/96

7. STATEMENT OF FINANCIAL CONDITION (Required by A.R.S. §10-1081.A.6.)

You must submit a statement of the corporation's financial condition. Any reasonable schedule will be accepted provided it reflects the intent of the law, as determined by the Commission. Several suggestions for information you may submit to satisfy this requirement include the following:

- Attach a copy of Page 2, Form 99 filed with the Arizona Department of Revenue; OR
- a copy of the corporation's Charitable Organization Financial Statement as filed with the Arizona Secretary of State pursuant to A.R.S. §44-6552; OR
- a copy of your treasurer's report (or financial statement) prepared for this fiscal year; OR
- a copy of the financial statement you prepare for the benefit of your members; OR
- You may simply use the Balance Sheet below.

BALANCE SHEET

ASSETS

Current Assets:

Cash	\$ 272,119	
Trade notes and accounts receivable (less allowance for bad debts)	602	
Inventories		
Other current assets	6,822	
Total Current Assets		\$ 279,543
Land, buildings and other fixed assets (net of accumulated depreciation)		
Other assets		
Total Assets		\$ 279,543

LIABILITIES

Current Liabilities:

Accounts Payable	\$ 14,376	
Mortgages, notes, bonds (payable in less than 1 year)	35,569	
Other current liabilities		
Total Current Liabilities		49,945
Mortgages, notes, bonds (payable in more than 1 year)		
Fund Balances:		
Restricted	70,311	
Unrestricted	159,287	
Total Fund Balances		229,598
Total Liabilities and Fund Balances		\$ 279,543

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)

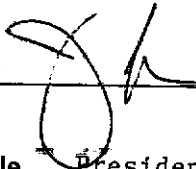
Are you currently in federal bankruptcy proceedings, and if so, under which chapter of federal bankruptcy law is the action filed and on what date?

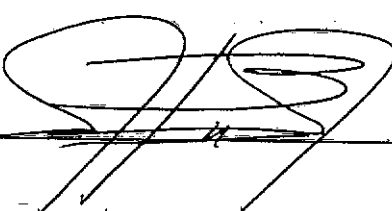
Yes _____ Chapter _____ Date Filed _____ Case Number _____ No X

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  Date 3/7/97
Title President

By  Date 3.12.97
Title Sec/Treasure