



**STATE OF ARIZONA
CORPORATION COMMISSION
CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE**



DUE ON OR BEFORE 04/23/1998

FILING FEE \$10.00

The following information is required by A.R.S. §10-1622 & §10-2501 for all corporations organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form is A.R.S. §10-121.A & §10-2545.A. **YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM.** Make changes or corrections where necessary. See instructions for proper format. **REFER TO THE INSTRUCTIONS ON PAGE 4.**

1. CASITA EL PUENTE ASSOCIATION, INC.
PO BOX 188
SCOTTSDALE, AZ 85252

RECEIVED

RECEIVED

NOV 24 1998

MAR 24 1998

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Corporation File Number:

(Business phone is optional)

Business Phone:

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION
RECEIVED
JUL 15 1998
DOCUMENTS ARE SUBJECT
TO REVIEW BEFORE
FILING

2. Arizona Statutory Agent: ASSOCIATED PROPERTY MANAGEMENT
Street Address: 14829 N CAVE CREEK RD #19
(NOT P.O. BOX)
City, State, Zip: PHOENIX AZ 85032-

0114383-0

| | |
|---------------------|----|
| ACC USE ONLY | |
| Fee \$ | 10 |
| Penalty \$ | |
| Reinstate \$ | |
| Expedite \$ | |
| Total \$ | |
| FY97-98 | |

PAID

If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below.

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

Signature _____

3. Secondary Address:
(Foreign Corporations are **REQUIRED** to complete this section.)

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

BUSINESS CORPORATIONS

NON-PROFIT CORPORATIONS

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

- 1. Charitable
- 2. Benevolent
- 3. Educational
- 4. Civic
- 5. Political
- 6. Religious
- 7. Social
- 8. Literary
- 9. Cultural
- 10. Athletic
- 11. Science/Research
- 12. Hospital/Health Care
- 13. Agricultural
- 14. Animal Husbandry
- 15. Homeowner's Association
- 16. Professional, commercial industrial or trade association
- 17. Other

5. CAPITALIZATION: (Business Corporations and Business Trusts are REQUIRED to complete this section.)

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate.

Number of Shares/Certificates Authorized Class Series Within Class (if any)

Number of Shares/Certificates Issued Class Series Within Class (if any)

6. SHAREHOLDERS: (Business Corporations and Business Trusts are REQUIRED to complete this section.)

List shareholders holding more than 20% of any class of shares issued by the corporation, or having more than a 20% beneficial interest in the corporation.

Name: Name:

NONE

Name: Name:

7. OFFICERS (If no changes since last report, check here and go on to Section 8.) Merle D. Dohn

Name: ~~MARION WELLS~~ Dole Nearhood Name: ~~CHRISTINE MOLESKY~~

Title: PRESIDENT/CEO NEARHOOD Title: VICE-PRESIDENT

Address: P O BOX 188 Address: P O BOX 188
SCOTTSDALE, AZ 85252- SCOTTSDALE, AZ 85252-

Date taking office: 02-11-98 Date taking office: 02-11-98

Name: ~~ANN RAVNER~~ C. Molesky Name: ~~JAMIE HASTINGS~~ Awin Scheiden

Title: SECRETARY Christine Molesky Title: TREASURER

Address: P O BOX 188 Address: P O BOX 188
SCOTTSDALE, AZ 85252- SCOTTSDALE, AZ 85252-

Date taking office: 02-11-98 Christine Molesky Date taking office: 02-11-98

8. DIRECTORS (If no changes since last report, check here and go on to Section 9.)

Name: ~~JOAN ROFF~~ Merle Dohn Name: ~~ANN RAVNER~~ Irene Skelly

Address: P O BOX 188 Address: P O BOX 188
SCOTTSDALE, AZ 85252- SCOTTSDALE, AZ 85252-

Date taking office: 02-11-98 Date taking office: 02-11-98

Name: ~~JAMIE HASTINGS~~ Merle Dohn Name:

Address: P O BOX 188 C. Molesky Address:
SCOTTSDALE, AZ 85252-

Date taking office: 02-11-98 Date taking office:

BALANCE SHEET - CASITA EL PUENTE H.O.A.
December, 1997

11/22/98

PREPARED FOR :

Casita El Puente H.O.A.
c/o APM
P.O. Box 188
Scottsdale, AZ 85252

PREPARED BY :

Associated Property Mgmt
P.O. Box 188
Scottsdale, AZ 85252

ASSETS

CASH

| | |
|-------------------------|-----------|
| Checking Account 1 | 12,750.79 |
| #1 Money Market Account | 6,750.64 |
| #2 Money Market Account | 5,199.72 |

Total Cash 24,701.15

RECEIVABLES

A/R Dues 3,655.00

Total Receivables 3,655.00

Total Assets 28,356.15

LIABILITIES

CURRENT LIABILITIES

Prepaid Dues 3,150.38

Total Liabilities 3,150.38

CAPITAL

| | |
|-------------------|-----------|
| Retained Earnings | 24,219.69 |
| Net Income | 986.08 |

Total Capital 25,205.77

Total Liab. and Capital 28,356.15

BUDGET COMPARISON - CASITA EL PUENTE H.O.A.
December, 1997

PREPARED FOR :
Casita El Puente H.O.A.
c/o APM
P.O. Box 188
Scottsdale, AZ 85252

PREPARED BY :
Associated Property Mgmt
P.O. Box 188
Scottsdale, AZ 85252

| | MTD Actual | MTD Budget | MTD \$Var. | % | YTD Actual | YTD Budget | YTD \$Var. | % | Annual |
|------------------------------|--------------|--------------|-------------|---------------|---------------|---------------|--------------|--------------|---------------|
| OPERATING ACCOUNT | | | | | | | | | |
| REVENUE | | | | | | | | | |
| Dues | 7,885 | 7,885 | | | 95,250 | 94,620 | 630 | .67 | 94,620 |
| Late Fee | | | | | 230 | | 230 | | |
| Interest | 30 | 8 | 22 | 262.06 | 476 | 100 | 376 | 375.80 | 100 |
| Total Revenue | 7,915 | 7,893 | 22 | .28 | 95,956 | 94,720 | 1,236 | 1.30 | 94,720 |
| EXPENSE | | | | | | | | | |
| COMMON EXPENSE | | | | | | | | | |
| Social | | | | | 114 | | -114 | | |
| INSURANCE | | | | | | | | | |
| Homeowner's | 368 | | -368 | | 2,561 | 4,010 | 1,449 | 36.13 | 4,010 |
| Legal | | 34 | 34 | 100.00 | 150 | 408 | 258 | 63.24 | 408 |
| License | | 17 | 17 | 100.00 | | 204 | 204 | 100.00 | 204 |
| PROFESSIONAL SERVICES | | | | | | | | | |
| Accounting Fees | | 13 | 13 | 100.00 | | 150 | 150 | 100.00 | 150 |
| Management Fees | 549 | 450 | -99 | -22.09 | 5,499 | 5,400 | -99 | -1.84 | 5,400 |
| Other | | 21 | 21 | 100.00 | | 252 | 252 | 100.00 | 252 |
| SUPPLIES | | | | | | | | | |
| Copies | | 20 | 20 | 100.00 | 160 | 240 | 80 | 33.50 | 240 |
| Postage | | 17 | 17 | 100.00 | 249 | 200 | -49 | -24.50 | 200 |
| Printing | | 7 | 7 | 100.00 | 119 | 80 | -39 | -48.96 | 80 |
| Other | | | | | 28 | | -28 | | |
| TAXES | | | | | | | | | |
| Income | | 4 | 4 | 100.00 | 50 | 50 | | | 50 |
| Other | | | | | 10 | | -10 | | |
| UTILITIES | | | | | | | | | |
| Electricity | 362 | 442 | 80 | 18.11 | 5,081 | 5,304 | 223 | 4.20 | 5,304 |
| Gas | 830 | 291 | -539 | -185.38 | 3,185 | 3,492 | 307 | 8.80 | 3,492 |
| Sanitation | | | | | 698 | | -698 | | |
| Trash Collection | | 610 | 610 | 100.00 | 3,018 | 7,320 | 4,302 | 58.77 | 7,320 |
| Water | 2,241 | 1,667 | -574 | -34.44 | 19,324 | 20,000 | 676 | 3.38 | 20,000 |
| OTHER COMMON EXPENSE | | | | | | | | | |
| Bank Charge | | 4 | 4 | 100.00 | 13 | 50 | 37 | 74.18 | 50 |
| Owner Reimbursement | | | | | 13 | | -13 | | |
| Total Common Expense | 4,350 | 3,596 | -755 | -20.99 | 40,271 | 47,160 | 6,889 | 14.61 | 47,160 |
| BUILDINGS EXPENSE | | | | | | | | | |
| Clubhouse | | 25 | 25 | 100.00 | | 300 | 300 | 100.00 | 300 |
| MAINTENANCE | | | | | | | | | |
| Cleaning/Repairs | 286 | 142 | -144 | -101.64 | 1,429 | 1,704 | 275 | 16.12 | 1,704 |
| Painting | | 4 | 4 | 100.00 | 20 | 50 | 31 | 60.99 | 50 |

| | MTD Actual | MTD Budget | MTD \$Var. | % | YTD Actual | YTD Budget | YTD \$Var. | % | Annual |
|--------------------------------|--------------|--------------|---------------|----------------|---------------|---------------|----------------|----------------|---------------|
| Pest Control | 125 | 52 | -73 | -140.38 | 675 | 624 | -51 | -8.17 | 624 |
| Fire Extinguishers | | | | | 63 | 1 | -62 | -6150.00 | 1 |
| Other | | 51 | 51 | 100.00 | | 608 | 608 | 100.00 | 608 |
| EXTERIOR REPAIRS | | | | | | | | | |
| Roof Repair | -3,567 | | 3,567 | | 150 | | -150 | | |
| Wall | 5,493 | | -5,493 | | 22,722 | | -22,722 | | |
| Other-Doors/Glass | | | | | 33 | | -33 | | |
| MECHANICAL | | | | | | | | | |
| Electrical | | 30 | 30 | 100.00 | 330 | 360 | 30 | 8.30 | 360 |
| Plumbing | | 42 | 42 | 100.00 | 1,027 | 504 | -523 | -103.82 | 504 |
| SUPPLIES | | | | | | | | | |
| Hardware | | 8 | 8 | 100.00 | 144 | 100 | -44 | -43.97 | 100 |
| Keys | | 5 | 5 | 100.00 | | 60 | 60 | 100.00 | 60 |
| Total Buildings Expense | 2,337 | 359 | -1,978 | -550.72 | 26,592 | 4,311 | -22,281 | -516.84 | 4,311 |
| GROUNDS EXPENSE | | | | | | | | | |
| LANDSCAPE MAINTENANCE | | | | | | | | | |
| Lawn Contract | 850 | 850 | | | 10,200 | 10,200 | | | 10,200 |
| Tree | | 223 | 223 | 100.00 | 4,090 | 2,670 | -1,420 | -53.18 | 2,670 |
| Material (Plants) | | 167 | 167 | 100.00 | 155 | 2,000 | 1,845 | 92.25 | 2,000 |
| Supplies | | 182 | 182 | 100.00 | 421 | 2,184 | 1,763 | 80.72 | 2,184 |
| Weed Control | | | | | 70 | | -70 | | |
| Fence/Gate/Wall | 317 | 54 | -263 | -485.23 | 547 | 650 | 103 | 15.85 | 650 |
| Fountain | | 38 | 38 | 100.00 | 133 | 450 | 317 | 70.40 | 450 |
| Lighting | | | | | 500 | | -500 | | |
| Sprinkler/Irrigation | | 50 | 50 | 100.00 | 1,998 | 600 | -1,398 | -232.94 | 600 |
| STREET | | | | | | | | | |
| Repair-Asphalt | | | | | 3,290 | 4,000 | 710 | 17.76 | 4,000 |
| Signs | | | | | 27 | | -27 | | |
| Miscellaneous | | 32 | 32 | 100.00 | | 388 | 388 | 100.00 | 388 |
| Total Grounds Expense | 1,167 | 1,595 | 428 | 26.84 | 21,430 | 23,142 | 1,712 | 7.40 | 23,142 |
| POOL EXPENSE | | | | | | | | | |
| License | | 17 | 17 | 100.00 | | 200 | 200 | 100.00 | 200 |
| Pool Maintenance-monthly | 220 | 220 | | | 2,685 | 2,640 | -45 | -1.70 | 2,640 |
| Repair | | 67 | 67 | 100.00 | 1,871 | 800 | -1,071 | -133.89 | 800 |
| Supplies | 40 | 67 | 27 | 40.00 | 885 | 800 | -85 | -10.58 | 800 |
| Other | | | | | 750 | | -750 | | |
| Total Pool Expense | 260 | 370 | 110 | 29.73 | 6,191 | 4,440 | -1,751 | -39.43 | 4,440 |
| Total Operating Expense | 8,115 | 5,920 | -2,194 | -37.07 | 94,485 | 79,053 | -15,431 | -19.52 | 79,053 |
| Excess or (Deficit) | -199 | 1,973 | -2,173 | -110.11 | 1,471 | 15,667 | -14,196 | -90.61 | 15,667 |
| MONEY MARKET ACCOUNT 1 | | | | | | | | | |
| REVENUE | | | | | | | | | |
| Total Revenue | | | | | | | | | |
| MONEY MARKET ACCOUNT 2 | | | | | | | | | |
| REVENUE | | | | | | | | | |
| Total Revenue | | | | | | | | | |

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-2501.A.6)

Only corporations that meet one or more of the following criteria must **attach** a financial statement (balance sheet including assets, liabilities and equity). The corporation is: 1) a **public service corporation** (e.g., public utility) as defined in Article XV, Section 2, Constitution of Arizona. 2) offers its **stock for sale** in transactions that are not exempt from A.R.S. §§ 44-1841 and 44-1842 as prescribed in §44-1844.A.1 (e.g., publicly traded). 3) a **nonprofit corporation**. All other forms of corporations are exempt from filing a financial disclosure.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-2505.A)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person 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 been:

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

One box **must** be marked: YES NO

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). | |

11. STATEMENT OF BANKRUPTCY (A.R.S. §10-202.D.2)

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and person controlling or holding more than 20% of the issued and outstanding common shares or 20% of any other proprietary, beneficial or membership interest in the corporation served in such capacity or held a 20% interest in any other corporation during the bankruptcy, receivership, or charter revocation of the other corporation?

One box **must** be marked: YES NO

If YES, enter the following: Chapter _____ Date Filed _____ Case Number _____

If "YES", the following information must be submitted as an attachment to this report for each person subject to the statement above. 1) The names and addresses of each corporation and the person or persons involved. 2) The state in which each corporation was a) incorporated b) transacted business. 3) The dates of corporate operation.

12. CAUTION: Signature requirements vary according to the type of corporation. See the instruction sheet for specific rules: Annual Reports submitted with incorrect signatures will be rejected.

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.

Name DALE NEARHOOD Date 3/19/98 Name C MOLESKY Date _____

Signature Dale Nearhood Signature Christine Moly

Title President Title SECRETARY

(Signator(s) must be duly authorized corporate officer(s) listed in section 7 of this report.)