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

DUE ON OR BEFORE 04/06/1998

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.

RECEIVED

FEB 19 1998

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

1. THE RANCH HOMESTEAD OWNERS ASSOCIATION
PO BOX 5168
CAREFREE, AZ 85377

Business Phone: 602-488-3421 (Business phone is optional)
State of Domicile: ARIZONA

480-245-3670 Corporation File Number: -0122069-1
Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: PETER WHEELER REISS
Street Address: 6733 E EXETER BLVD
(NOT P.O. BOX)
City, State, Zip: SCOTTSDALE AZ 85251-

ACC USE ONLY	
Fee	$ 10
Penalty	$
Reinstate	$
Expedite	$
Total	$ 10
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

__ 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 _____

NON-PROFIT CORPORATIONS

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.

NONE ☐

Name: _____ Name: _____

Name: _____ Name: _____

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

Name: THOMAS GELDERMANN
Title: PRESIDENT/CEO
Address: W4005 ELGIN CLUB RD
LAKE GENEVA, WI 53147-
Date taking office: 03-01-87

Name: _____
Title: _____
Address: _____
Date taking office: _____

Name: MICHAEL J JOHNSON
Title: SECRETARY
Address: 12809 N 2ND ST
PHOENIX, AZ 85022-5403
Date taking office: 04-15-96

Name: SEAN OBRIEN
Title: TREASURER
Address: 1133 E NORTHERN AVE
PHOENIX, AZ 85020-
Date taking office: 03-01-90

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

Name: THOMAS GELDERMANN
Address: W4005 ELGIN CLUB RD
LAKE GENEVA, WI 53147-
Date taking office: 03-01-87

Name: MICHAEL J JOHNSON
Address: 12809 N 2ND ST
PHOENIX, AZ 85022-5403
Date taking office: 04-15-96

Name: SEAN OBRIEN
Address: 1133 E NORTHERN AVE
PHOENIX, AZ 85020-
Date taking office: 03-01-90

Name: BRUCE HARTE
Address: PO BOX 2120
CAREFREE AZ 85377
Date taking office: 04/07/97

DIRECTOR

DORSEY H. LYNCH
39945 105TH WAY
SCOTTSDALE, AZ
85262

DATE TAKING OFFICE: 04/07/97

02/11/98

Ranch Homesteads Property Owners Association
Profit and Loss
January through December 1997

	Jan - Dec '97
Ordinary Income/Expense	
Income	
Dues Income	50,400.00
Special Assessment	87,150.00
Total Income	137,550.00
Expense	
Annual Fee	10.00
APS	
Legal	3,351.81
APS contract	50,000.00
Contract 24 & 25	12,868.00
Preperation	1,046.50
Total APS	67,266.31
Bank Service Charges	53.25
City of Scottsdale	
Water	306.00
Total City of Scottsdale	306.00
Income Tax	50.00
Insurance	2,710.00
Miscellaneous	
SCOHA Dues	80.00
Miscellaneous - Other	104.54
Total Miscellaneous	184.54
Office Supplies	
Postage	64.00
Office Supplies - Other	120.16
Total Office Supplies	184.16
Postage and Delivery	96.00
Professional Fees	
Accounting	1,250.00
Legal Fees	3,109.22
Secretarial Service	179.31
Total Professional Fees	4,538.53
Roads	
Clean up	578.00
Construction	16,115.70
Grading & Repairs	157.00
Total Roads	16,850.70
Security	
Desert Mountain Master Assoc.	13,447.96
Safeguard	1,100.00
Total Security	14,547.96
Telephone	106.13
Total Expense	106,903.58
Net Ordinary Income	30,646.42
Net Income	**30,646.42**

Ranch Homesteads Property Owners Association
Balance Sheet
As of December 31, 1997

	Dec 31, '97
ASSETS	
Current Assets	
Checking/Savings	
Bank One	28,656.73
Total Checking/Savings	28,656.73
Accounts Receivable	
Accounts Receivable	13,900.00
Total Accounts Receivable	13,900.00
Total Current Assets	42,556.73
TOTAL ASSETS	**42,556.73**
LIABILITIES & EQUITY	
Liabilities	
Long Term Liabilities	
Notes Payable	40,501.78
Total Long Term Liabilities	40,501.78
Total Liabilities	40,501.78
Equity	
Opening Bal Equity	20,550.76
Retained Earnings	-49,142.23
Net Income	30,646.42
Total Equity	2,054.95
TOTAL LIABILITIES & EQUITY	**42,556.73**

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.
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.

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 THOMAS A GOLDSMITH **Date** 2/11/98 **Name** MICHAEL J. JOHNSON **Date** 2/17/98

Signature _____ **Signature** _____

Title PRESIDENT **Title** SECRETARY

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