Arizona Corporation Commission

00505802

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

DUE ON OR BEFORE 04/27/2002 **FY01-02** **FILING FEE** $10.00

The following information is required by A.R.S. §§10-1622 & 10-11622 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. & 10-3121.A. YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. Make changes or corrections where necessary. Information for the report should reflect the current status of the corporation. See instructions for proper format. REFER TO THE INSTRUCTIONS ON PAGE 4.

RECEIVED
MAR 7 - 2002
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

1. -0124834-0
CITRUS VIEW CONDOMINIUM ASSOCIATION, INC.
PO BOX 27476
TEMPE, AZ 85285

RECEIVED
APR 2 4 2002
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone:_____ [redacted]
State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: CHARLES GERSON
Street Address: 2121 S MILL #104
TEMPE, AZ 85285-7476
City, State, Zip:

No $6/12/02

Use this box only if appointing a new Statutory Agent

[redacted]

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 of *new* Statutory Agent

RECEIVED
JUN 1 0 2002
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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

3. Secondary Address:
[redacted]

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. **Please Type or Print Clearly.**

Name: _____ Name: _____

NONE ☐

Name: _____ Name: _____

7. OFFICERS **Please Type or Print Clearly.**

Name: Gordon Keller
Title: President
Address: 2165 E University #218
Mesa AZ 85213
Date taking office: _____

Name: Lamar Chlarson
Title: _____
Address: 2165 E University #230
Mesa AZ 85213
Date taking office: _____

Name: Tom Fortunato
Title: _____
Address: 2165 E University #172
Mesa AZ 85213
Date taking office: _____

Name: Diane Pugens
Title: Secretary
Address: 2165 E University #232
Mesa AZ 85213
Date taking office: _____

8. DIRECTORS **Please Type or Print Clearly.**

Name: Michelle York
Address: 2165 E University #214
Mesa, AZ 85213
Date taking office: _____

Name: Bruce Miller
Address: 1958 N. Calle Maderas
Mesa AZ 85213
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

Citrus View Board Members 2002

-0124834-0

Gordon Keller 3 yr. Term	2165 E. University #218 Mesa, AZ 85213	644-0199 (H) 693-7014 (W) 693-7172 (W) (F) 693-7051 (W) (F) 644-0361 (H)
Michelle York 1 yr. Term	2165 E. University #214 Mesa, AZ 85213	962-2418
Lamar Chlarson 2 yr. Term	2165 E. University #230 Mesa, AZ 85213	668-7376 (H) 326-5369 (M)
Bruce Miller 3 yr. Term 1 yr. remaining	1958 N. Calle Maderas Mesa, AZ 85213	964-0332
Tom Fortunato 3 yr. Term	2165 E. University #172 Mesa, AZ 85213	615-6369 (H) 615-3040 (H)
Diane Pugens Secretary	2165 E. University #232 Mesa, AZ 85213	
Colleen DeCoto Newsletter	2165 E. University #190 Mesa, A Z 85213	835-7579

Cash Flow (Cash)
Citrus View HOA - (citrus)
Mar 02

Prepared For:
Citrus View Homeowners Association
P.O. Box 27476
Tempe, AZ 85285

Prepared By:
Gerson Realty & Management
2121 S. Mill Avenue
Suite 104
Tempe, AZ 85282

-0124834-0

	Month to Date	%	Year to Date	%
INCOME				
Capital Improvement Fund	0.00	0.00	405.00	1.24
Dues	10,115.00	98.26	32,036.00	98.02
Interest	0.00	0.00	6.63	0.02
Late Fee	150.00	1.46	205.00	0.63
Re-imbursement	29.00	0.28	29.00	0.09
TOTAL INCOME	10,294.00	100.00	32,681.63	100.00
EXPENSES				
ADMINISTRATIVE				
Bank Charges	0.00	0.00	25.00	0.08
Permits/Licenses	10.00	0.10	10.00	0.03
Printing/Postage	126.79	1.23	126.79	0.39
TOTAL ADMINISTRATIVE	136.79	1.33	161.79	0.50
LANDSCAPING				
Contract	181.35	1.76	3,185.35	9.75
Tree Trimming	375.00	3.64	375.00	1.15
TOTAL LANDSCAPING	556.35	5.40	3,560.35	10.89
MAINTENANCE				
Electrical	0.00	0.00	265.00	0.81
Tennis Court Project	0.00	0.00	1,700.00	5.20
Pest Control	350.00	3.40	350.00	1.07
Plumbing	0.00	0.00	45.00	0.14
Streets	367.74	3.57	893.10	2.73
Supplies	0.00	0.00	310.89	0.95
TOTAL MAINTENANCE	717.74	6.97	3,563.99	10.91
MANAGEMENT				
Contract	775.00	7.53	2,325.00	7.11
TOTAL MANAGEMENT	775.00	7.53	2,325.00	7.11
POOL				
Chemicals/Materials	360.18	3.50	360.18	1.10
Contract	275.00	2.67	825.00	2.52
TOTAL POOL	635.18	6.17	1,185.18	3.63
UTILITIES				
Electric	297.39	2.89	1,690.72	5.17
Garbage	348.60	3.39	1,136.10	3.48
Gas	0.00	0.00	392.88	1.20
Sewer	1,302.14	12.65	4,640.21	14.20
Water	1,867.31	18.14	5,019.69	15.36
TOTAL UTILITIES	3,815.44	37.06	12,879.60	39.41
TOTAL EXPENSES	6,636.50	64.47	23,675.91	72.44
NET OPERATING PROFIT	3,657.50	35.53	9,005.72	27.56
CASH FLOW	3,657.50		9,005.72	
Beginning Cash	15,724.83			
Ending Balance	19,382.33			

Please Enter Corporation Name: _____ 01248340

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)
Nonprofit corporations must attach a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corporations Only

This corporation **does** ☒ **does not** ☐ have members.

10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)
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:
[Underlined portion pertains to profit corporations only]

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?

[redacted] **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 & 10-3202.02)
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? **[Underlined portion pertains to profit corporations only]**

[redacted] **YES** ☐ **NO** ☒

Chapter _____ Date Filed _____ Case Number _____

[redacted]

12. SIGNATURES

[redacted]

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 E Hardin Keller Date 3-5-02 Name _____ Date _____

Signature E Hardin Keller Signature _____

Title President Citrus View HOA Title _____

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