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: -0142402-4
Corporation Name: THE EL DORADO SQUARE-SCOTTSDALE MANAGEMENT ASSOCIATION
Address: 6619 N SCOTTSDALE RD

City, State, Zip: SCOTTSDALE AZ 85250-
Domicile: ARIZONA
Type: NON-PROFIT

RECEIVED
MAR 10 1997
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Arizona Statutory Agent: B JOAN JONES
Street Address: 6619 N SCOTTSDALE RD
(NOT P.O. BOX)

City, State, Zip: SCOTTSDALE AZ 85250-

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. X Other COMMERCIAL PROPERTY MGMNT.
7. __ Religious	14. __ Hospital/Health Care	

ACC USE ONLY
Fee $ 10
Penalty $
Total PND

2. NUMBER OF EMPLOYEES: Please check one. (For statistical purposes only.)

25 or Less X 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 _____

-- PLEASE MAKE CORRECTIONS ON A SEPARATE SHEET --

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

PRESIDENT: JOHN MUELLER
Address: 6625 N SCOTTSDALE RD
SCOTTSDALE, AZ 85250-
Date taking office: 11-01-95

VICE PRESIDENT:
Address:
Date taking office:

SECRETARY: B JOAN JONES
Address: 6619 N SCOTTSDALE RD
SCOTTSDALE, AZ 85250-
Date taking office: 11-01-95

TREASURER: B JOAN JONES
Address: 6619 N SCOTTSDALE RD
SCOTTSDALE, AZ 85250-
Date taking office: 11-01-95

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

NAME: JUDI MORGAN
Address: 6619 N SCOTTSDALE RD
SCOTTSDALE, AZ 85250-
Date taking office: 11-01-95

NAME: JOHN ROSSO
Address: 9449 N 90TH ST STE 107
SCOTTSDALE, AZ 85258-
Date taking office: 11-01-95

NAME: JUDY FLYNN
Address: 6607 N SCOTTSDALE RD
SCOTTSDALE, AZ 85250-
Date taking office: 11-01-95

NAME:
Address:
Date taking office:

~~ DO NOT WRITE BELOW THIS LINE ~~

Schedule L Balance Sheets per Books

Assets	Beginning of tax year (a)	Beginning of tax year (b)	End of tax year (c)	End of tax year (d)
1 Cash		11,754.		11,258.
2a Trade notes and accounts receivable				
b Less allowance for bad debts				
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (attach schedule)				
7 Loans to stockholders				
8 Mortgage and real estate loans				
9 Other investments (attach schedule)				
10a Buildings and other depreciable assets	22,137.		26,938.	
b Less accumulated depreciation	7,869.	14,268.	14,097.	12,841.
11a Depletable assets				
b Less accumulated depletion				
12 Land (net of any amortization)				
13a Intangible assets (amortizable only)				
b Less accumulated amortization				
14 Other assets (attach schedule)				
15 Total assets		26,022.		24,099.
Liabilities and Stockholders' Equity				
16 Accounts payable				
17 Mortgages, notes, bonds payable in less than 1 year				
18 Other current liabilities (attach sch)				
19 Loans from stockholders				
20 Mortgages, notes, bonds payable in 1 year or more				
21 Other liabilities (attach schedule)				
22 Capital stock: a Preferred stock				
b Common stock				
23 Paid-in or capital surplus		23,436.		23,436.
24 Retained earnings — Approp				
25 Retained earnings — Unappropriated		2,586.		663.
26 Less cost of treasury stock				
27 Total liabilities and stockholders' equity		26,022.		24,099.

Note: *You are not required to complete Schedules M-1 and M-2 below if the total assets on line 15, column (d) of Schedule L are less than $25,000.*

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return (see instructions.)

1 Net income (loss) per books	-1,923.	7 Income recorded on books this year not included on this return (itemize): Tax-exempt interest $	
2 Federal income tax	388.		
3 Excess of capital losses over capital gains			
4 Income subject to tax not recorded on books this year:		8 Deductions on this return not charged against book income this year (itemize): a Depreciation $ 0.	
5 Expenses recorded on books this year not deducted on this return (itemize): a Depreciation $ b Contributions carryover $ c Travel & entertainment $		b Contrib carryover $	
SEC. 179 CARRYOVER 1,535.	1,535.		0.
6 Add lines 1 through 5	0.	9 Add lines 7 and 8	0.
		10 Income (line 28, page 1) — line 6 less line 9	0.

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	2,586.	5 Distributions a Cash	
2 Net income (loss) per books	-1,923.	b Stock c Property	
3 Other increases (itemize):		6 Other decreases (itemize):	
		7 Add lines 5 and 6	
4 Add lines 1, 2, and 3	663.	8 Balance at end of year (line 4 less line 7)	663.

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.
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.

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 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 6 Feb 97 By [signature] Date 3/6/97

Title ✓ President Title ✓ Secretary/Treasurer