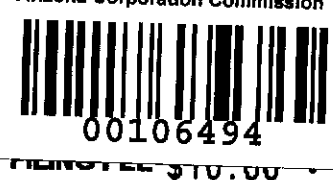




ARIZONA CORPORATION COMMISSION
CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE



DUE ON OR BEFORE 04/07/1999

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.**

1. COUNTRY MEADOWS CONDOMINIUMS UNIT TWO ASSOCIATION
~~% ROSSMAR MANAGEMENT CO~~ New Horizon Management Co.
~~PO BOX 11289~~ 6650 N 35th Ave # 100
PHOENIX, AZ 85064 85051

RECEIVED
FEB - 2 2000

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

Business Phone: _____
State of Domicile: ARIZONA
Corporation File Number: _____
Type of Corporation: NON-PROFIT

-0158802-1

2. Arizona Statutory Agent: ~~JAMIE ROSE~~ New Horizon Management
Street Address: ~~2911 W JULIE DR~~ 6650 N 35th Ave #100
(NOT P.O. BOX)
City, State, Zip: PHOENIX AZ 85027-85051

Use this box only if appointing a new Statutory Agent

ACTIVE ONLY
FORM 1.10
PARTY 1
MAR 1998
FY 98-99

IPR
29

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]
Signature of new Statutory Agent

RECEIVED

AUG 3 0 1999

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

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

Business trusts must indicate the number of transferable certificates held by trustee(s) on the trust estate.

Number of Shares/Certificates Authorized	Class	Series Within Class (if any)
<u>N/A</u>		
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.)

Name: <u>KEN LILJEGREN</u>	Name: _____
Title: <u>PRESIDENT/CEO</u>	Title: _____
Address: <u>1433 N 1ST ST</u>	Address: _____
<u>PHOENIX, AZ 85004-</u>	_____
Date taking office: <u>08-28-97</u>	Date taking office: _____
Name: <u>BILL CHRISTOFFERSON</u>	Name: <u>RALPH WOOD</u>
Title: <u>SECRETARY</u>	Title: <u>TREASURER</u>
Address: <u>10807 W NORTHERN #105</u>	Address: <u>10807 W NORTHERN #125</u>
<u>GLENDAL, AZ 85307-</u>	<u>GLENDAL, AZ 85307-</u>
Date taking office: <u>08-28-97</u>	Date taking office: <u>08-28-97</u>

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

Name: <u>KEN LILJEGREN</u>	Name: <u>BILL CHRISTOFFERSON</u>
Address: <u>1433 N 1ST ST</u>	Address: <u>10807 W NORTHERN #105</u>
<u>PHOENIX, AZ 85004-</u>	<u>GLENDAL, AZ 85307-</u>
Date taking office: <u>08-28-97</u>	Date taking office: <u>08-28-97</u>
Name: <u>RALPH WOOD</u>	Name: <u>DEBBIE LUEVANO</u>
Address: <u>10807 W NORTHERN #125</u>	Address: <u>10807 W NORTHERN #102</u>
<u>GLENDAL, AZ 85307-</u>	<u>GLENDAL, AZ 85307-</u>
Date taking office: <u>08-28-97</u>	Date taking office: <u>08-28-97</u>

COUNTRY MEADOWS CONDOMINIUMS UNIT TWO ASSOCIATION
BOARD OF DIRECTORS
FILE ID #0158802-1

August 6, 1999

Please make the following corrections to the 1999 Board of Directors.

Officers:

President:

Mark Merrill
8650 N 35th Ave #100
Phoenix, AZ 85051
Elected 3/99

Vice President:

Beverly Hamby
8650 N 35th Ave #100
Phoenix, AZ 85051
Elected 3/99

Secretary:

Debbie Luevano
8650 N 35th Ave #100
Phoenix, AZ 85051
Elected 3/99

Treasurer:

Denny Jenkins
8650 N 35th Ave #100
Phoenix, AZ 85051
Elected 3/99

Directors:

Nancy Ripple
8650 N 35th Ave #100
Phoenix, AZ 85051
Elected 3/99

For the month of December

Accounting Year to - December

ASSETS

CURRENT ASSETS

Cash in Bank - Operating	10,498.97
Cash In Bank	22,438.46
Certificate of Deposit	1,304.18
Certificate of Deposit	1,291.25
Certificate of Deposit	1,329.65
Certificate of Deposit	1,295.23
Certificate of Deposit	2,568.76
Certificate of Deposit	1,754.26
Cash in Bank - Checking	6,967.04

TOTAL CURRENT ASSETS 49,447.80

FIXED ASSETS

OTHER ASSETS

TOTAL ASSETS

49,447.80

LIABILITIES

CURRENT LIABILITIES

DEFERRED MAINT RESERVES

TOTAL LIABILITIES

0.00

CAPITAL/EQUITY

Members Equity

20,783.39

PROFIT/LOSS Y-T-D

28,664.41

TOTAL CAPITAL/EQUITY

49,447.80

TOTAL LIABILITIES & CAPITAL/EQUITY

49,447.80

9. FINANCIAL DISCLOSURE (A.R.S. §§ 10-1622.B & 10-11622.A.3)

Only 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 & 10-2505.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 the report for each person subject to the statement above: 1) The name and address 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. SIGNATURES

CAUTION: Annual Reports must be signed by a duly authorized officer. 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 Mpx C Moxu Date 8-24-99 Name _____ Date _____

Signature [Signature] Signature _____

Title President Title _____

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