



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

AZ Corp. Commission
 00758840

DUE ON OR BEFORE 07/18/2003

FY03-04

HOAMCO
 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.

1. -0171302-1
 THE RIDGE AT SEDONA ASSOCIATION OF HOMEOWNERS, INC
 PO BOX 10000
 PRESCOTT, AZ 86304

RECEIVED
 AUG 11 2003

ARIZONA CORP. COMMISSION
 CORPORATIONS DIVISION

Business Phone: _____ (Business phone is optional.)
 State of Domicile: **ARIZONA** Type of Corporation: **NON-PROFIT**

2. Statutory Agent: JUSTIN SCOTT
 Mailing Address: PO BOX 10000
 City, State, Zip: PRESCOTT, AZ 86304

Physical Address, if Different.
 Physical Address: 531 MADISON AVE
 City, State, Zip: PRESCOTT, AZ 86301

ACC USE ONLY	
Fee	\$ 10-
Penalty	\$ _____
Reinstate	\$ _____
Expedite	\$ _____
Resubmit	\$ _____

IPR
 8-1303

Use this box only if appointing a new Statutory Agent

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 of new Statutory Agent

643332
 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. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized**. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of **shares issued**. **Please Print or Type Clearly.**

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

N/A

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

N/A

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. You Must List at Least One.

Name: _____ Name: _____

Title: _____ Title: _____

Address: _____ Address: _____

SEE ATTACHED

Date taking office: _____ Date taking office: _____

Name: _____ Name: _____

Title: _____ Title: _____

Address: _____ Address: _____

Date taking office: _____ Date taking office: _____

8. DIRECTORS Please Type or Print Clearly. You Must List at Least One.

Name: _____ Name: _____

Address: _____ Address: _____

SEE ATTACHED

Date taking office: _____ Date taking office: _____

Name: _____ Name: _____

Address: _____ Address: _____

Date taking office: _____ Date taking office: _____

RUN DATE: 7/16/03
RUN TIME: 1:59 PM

The Ridge at Sedona Association of Homeowners, Inc
BOARD/COMMITTEE MEMBERS REPORT AS OF 07/16/03

AUG 7 2003

PROCESSED

PAGE 1

NAME/ADDRESS	TITLE/E-MAIL	WORK/FAX	HOME/CELL	TERM EXPIRATION

CLASS: PRESIDENT				
Knud Stobbe 215 Ridge Trail Sedona AZ 86351	President		928-284-2182	
CLASS: VICE PRESIDENT/SECRETARY				
Paul Jankovsky 45 Rim Trail Circle Sedona AZ 86351	Vice President/Secretary pjankovsky@earthlink.net		928-284-5511	
CLASS: TREASURER/SECRETARY				
Katie Amundson 66 Ridge Rock Road Sedona AZ 86351	Treasurer/Secretary	928-284-6968	928-284-0778	
CLASS: DIRECTOR 1				
Rob Underwood 203 Ridge Trail Sedona AZ 86351	Director	928-284-1533	928-284-0047	
CLASS: DIRECTOR 2				
Chas Chisom 1905 Sunset Ave SW Seattle WA 98116	Director 2 geririnaz@aol.com or geriinwa@aol.com		928-284-3285	
CLASS: ARCHITECTURAL REVIEW				
Hal Carter 30 Rim Trail Circle Sedona AZ 86351	ARC Co-Chairman hal@kachina.net		928-284-9332	

-- End of report --

Run Date: 07/16/03
Run Time: 02:01 PM

RECEIVED
AUG 7 2003
HOA

The Ridge at Sedona Association of Homeowners, Inc
Balance Sheet
As of 06/30/03

ASSETS

B of A Operating	\$	19,149.51	
B of A Money Market		64,403.58	
A/R Association Dues		1,385.00	
A/R Intent/Lien		35.00	
A/R Lien Filing Fee		135.00	
A/R Fine Assessment		1,000.00	
A/R Other		8,251.00	
A/R Collection Notice Fee		69.00	
TOTAL ASSETS			\$ 94,428.09

LIABILITIES & EQUITY

CURRENT LIABILITIES:

Prepaid Assessment	\$	4,850.00	
Collection Notice Fee Payable		120.00	
Subtotal Current Liab.			\$ 4,970.00

EQUITY:

Operating Fund	\$	27,591.65	
Reserve Fund-Condos		48,524.57	
Reserve Fund-Streets		13,555.29	
Current Year Net Income/(Loss)		(213.42)	
Subtotal Equity			\$ 89,458.09
TOTAL LIABILITIES & EQUITY			\$ 94,428.09

9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9)

Nonprofit corporations **must attach** a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.

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

APR 7 2003
KNUD STOBBE

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/or 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 business 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?

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, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.02, 10-1623 & 10-11623)

- A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box **must** be marked: **YES** **NO**
- B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR held or controlled over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?

[Underlined portion pertains to business corporations only] One box **must** be marked: **YES** **NO**

If "YES" to A and/or B, 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. (e.g. officer, director, trustee or major stockholder)
2. The state in which each corporation was a) incorporated b) transacted business.
3. The dates of corporate operation.
4. If any involved person (listed in #1) has been involved in any other bankruptcy proceeding within the past year, the name and address of each corporation.
5. Date, Case number and Court where the bankruptcy was filed or receiver appointed.
6. Name and address of court appointed receiver.

12. SIGNATURES: Annual Reports must be signed and dated by at least one duly authorized officer or they 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 Knud Ge Stobbe, III Date 8/6/03 Name Paul Jankowski Date 8/6/03

Signature KNUD STOBBE Signature Paul Jankowski

Title PRESIDENT Title SECRETARY / VP

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