



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

AZ Corp. Commission



00876258

DUE ON OR BEFORE 04/09/2004

FY03-04

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 on page 4 for proper format.

1. -0175211-4

TRACT 208 PROPERTY OWNERS ASSOCIATION
% EAGLE COMMERCIAL REALTY SERV
3875 N 44TH ST #102
PHOENIX, AZ 85018

RECEIVED

FEB 26 2004

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: _____ (Business phone is optional.)

State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

2. Statutory Agent: JPF COMMERCIAL REALTY SERVICE
Mailing Address: 3875 N 44TH ST #102
City, State, Zip: PHOENIX, AZ 85018

Physical Address, If Different.
Physical Address:
City, State, Zip:

ACC USE ONLY

Fee \$ 10.02/25/04
Penalty \$ _____
Reinstate \$ _____
Expedite \$ _____
Resubmit \$ _____

IPR

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

Printed Name of new Statutory Agent

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 | ☐ 20. Manufacturing |
| ☐ 2. Advertising | ☐ 21. Mining |
| ☐ 3. Aerospace | ☐ 22. News Media |
| ☐ 4. Agriculture | ☐ 23. Pharmaceutical |
| ☐ 5. Architecture | ☐ 24. Publishing/Printing |
| ☐ 6. Banking/Finance | ☐ 25. Ranching/Livestock |
| ☐ 7. Barbers/Cosmetology | ☐ 26. Real Estate |
| ☐ 8. Construction | ☐ 27. Restaurant/Bar |
| ☐ 9. Contractor | ☐ 28. Retail Sales |
| ☐ 10. Credit/Collection | ☐ 29. Science/Research |
| ☐ 11. Education | ☐ 30. Sports/Sporting Events |
| ☐ 12. Engineering | ☐ 31. Technology(Computers) |
| ☐ 13. Entertainment | ☐ 32. Technology(General) |
| ☐ 14. General Consulting | ☐ 33. Television/Radio |
| ☐ 15. Health Care | ☐ 34. Tourism/Convention Services |
| ☐ 16. Hotel/Motel | ☐ 35. Transportation |
| ☐ 17. Import/Export | ☐ 36. Utilities |
| ☐ 18. Insurance | ☐ 37. Veterinary Medicine/Animal Care |
| ☐ 19. Legal Services | ☐ 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)

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. You Must List at Least One.

Name: Vladimir Hulpach

Name: Lowell Janson

Title: Secretary/Treasurer

Title: President

Address: 16439 E. Nickaus Drive
Fountain Hills, AZ 85268

Address: 13216 N. Verde River Drive
Fountain Hills, AZ 85268

Date taking office: 1/1/04

Date taking office: 1/1/04

Name: Barbara Pederson

Name: Dan Kauffman

Title: _____

Title: Vice-President

Address: 16038 Pincushion Way
Fountain Hills, AZ 85268

Address: 16810 E. Avenue of the Fountains #105
Fountain Hills, AZ 85268

Date taking office: 1/1/04

Date taking office: 1/1/04

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

Name: Lowell Janson, President

Name: _____

Address: 13216 N. Verde River Drive
Fountain Hills, AZ 85268

Address: _____

Date taking office: 1/1/04

Date taking office: _____

Name: _____

Name: _____

Address: _____

Address: _____

Date taking office: _____

Date taking office: _____

INCOME STATEMENT
FOR THE PERIOD ENDED DECEMBER 31, 2003 - 0175211-4

	CURRENT PERIOD INCOME	YEAR TO DATE
REGULAR ASSESSMENT INCOME \$	9,132.37	\$ 119,123.10
TRASH COLLECTIONS	(1,039.40)	22,045.74
SPECIAL ASSESSMENT INCOME	0.00	399.75
	-----	-----
TOTAL ASSESSMENTS	8,092.97	141,568.59
MISCELLANEOUS INCOME		
LATE CHARGES	151.58	1,129.33
LIEN FEES	0.00	(40.00)
ARCHITECTURAL REVIEW FEE	0.00	3,000.00
PARKING LOT RENTAL	0.00	6,240.00
LEGAL INCOME/COLL CHARGES	0.00	115.00
INTEREST INCOME	52.86	654.00
OTHER INCOME	0.00	251.41
	-----	-----
TTL MISCELLANEOUS INCOME	204.44	11,349.74
	-----	-----
TOTAL INCOME	8,297.41	152,918.33
	=====	=====
EXPENSES		
ADMINISTRATIVE		
LEGAL FEES - GENERAL	0.00	3,279.72
AUDIT EXPENSE	0.00	200.00
MANAGEMENT FEES	1,500.00	22,711.00
CONSTRUCTION MGMT FEES	0.00	4,131.23
OFFICE EXPENSE REIMBURSE	69.35	2,084.61
MISCELLANEOUS EXPENSES	77.33	157.33
INSURANCE EXPENSE	0.00	2,690.60
TAXES-CORPORATE & INCOME	0.00	(3,497.00)
	-----	-----
TOTAL ADMINISTRATIVE EXP	1,646.68	31,757.49

PLAT 208 POA

INCOME STATEMENT
FOR THE PERIOD ENDED DECEMBER 31, 2003

- 0175211-4

	CURRENT PERIOD	YEAR TO DATE
POOL EXPENSES	-----	-----
COMMONA AREA EXPENSES		
COMMON AREA REPAIRS	263.00	13,263.98
LANDSCAPE MAINT CONTRACT	1,574.00	42,768.50
C/A STRUCTURES/WALLS/FENC	0.00	1,295.00
STREET SWEEPING CONTRACT	0.00	4,555.00
STREETS & PARKING REPAIR	1,004.96	1,004.96
SPRINKLER MAINTENANCE	0.00	185.50
	-----	-----
TOTAL COMMON AREA EXPENSE	2,841.96	63,072.94
CLUBHOUSE EXPENSE		
UNIT/BUILDING MAINTENANCE	-----	-----
UTILITY EXPENSES		
WATER	392.99	5,054.53
ELECTRICITY	17.64	348.67
WASTE REMOVAL	1,950.50	23,234.33
	-----	-----
TOTAL UTILITY EXPENSE	2,361.13	28,637.53
	-----	-----
TOTAL EXPENSES	6,849.77	123,467.96
	-----	-----
NET INCOME (LOSS)	1,447.64	29,450.37
	=====	=====
RESERVE EXPENDITURES	-----	-----
	-----	-----

PREPARED BY: EAGLE COMMERCIAL REALTY SERVICES
602.952.1282

PLAT 208 POA

BALANCE SHEET
FOR THE PERIOD ENDED DECEMBER 31, 2003

-0175211-4

ASSETS

CASH	
1020-0000	OPERATING CASH 7,367.01
1030-0000	OPERATING RESERVES 53,497.74

1099-0000	TOTAL CASH 60,864.75
ACCOUNTS RECEIVABLE	

PREPAID EXPENSES	

FIXED ASSETS	

1989-0000	TOTAL ASSETS 60,864.75
	=====

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PLAT 208 POA

BALANCE SHEET
FOR THE PERIOD ENDED DECEMBER 31, 2003

- 0175211-4

LIABILITIES

ACCOUNTS PAYABLE		
2130-0000	DEPOSITS - ARCHITECTURAL	2,500.00

2199-0000	TOTAL PAYABLES	2,500.00

2889-0000	TOTAL LIABILITIES	2,500.00

EQUITY		
2935-0000	FUND BALANCE	28,914.38
2940-0000	CURRENT EARNINGS	29,450.37

2989-0000	TOTAL HOA EQUITY	58,364.75

2999-0000	TTL LIABILITIES & EQUITY	60,864.75
=====		

PREPARED BY: EAGLE COMMERCIAL REALTY SERVICE
602.952.1282

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.

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; |
| 4. Prior addresses (for immediate preceding 7 year period). | the date and location; the court and public agency involved, and the file or cause number of the case. |

11. STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.D.2, 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 LOWELL C. JANSON Date 2/12/04 Name _____ Date _____

Signature PRESIDENT/DIRECTOR Signature _____

Title Lowell Janson Title _____

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