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

AZ Corp. Commission
02358611

DUE ON OR BEFORE 04/09/2008 FY07-08 **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 #350
PHOENIX, AZ 85018

RECEIVED
MAR 18 2008
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: 602-952-1282 (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 #350
City, State, Zip: PHOENIX, AZ 85018

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

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

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
__ 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. X Other property Owners Assoc.

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 Print or Type Clearly.**

5a. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized**.

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

5b. 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**.

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.**

NONE ☐

Name: ______ **Name:** ______

Name: ______ **Name:** ______

7. OFFICERS **Please Type or Print Clearly. You Must List at Least One.**

Name: Ron, tovala **Name:** ______

Title: President Title: ______

Address: 12749 E. turquoise Ave Scottsdale, Az 85259 Address: ______

Date taking office: 1-1-06 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: Gordon Pittsburger **Name:** ______

Address: 15620 E. Ozolla Dr. Fountain Hills, Az 85268 Address: ______

Date taking office: 1-1-06 Date taking office: ______

Name: ______ **Name:** ______

Address: ______ Address: ______

Date taking office: ______ Date taking office: ______

PLAT 208 POA
2006 Board of Directors

President	Ron Tovella 12749 E. Turquoise Avenue Scottsdale, AZ 85259
Secretary/Treasurer	Barbara Pederson 16038 Pincushion Way Fountain Hills, AZ 85268
Board Member	Gordon Pittsenbarger 15620 E. Cholla Drive Fountain Hills, AZ 85268
Board Member	Jane Minihan P.O. Box 18925 Fountain Hills, AZ 85269
Board Member	Daniel Kauffman 16810 E. Avenue of the Fountains #105 Fountain Hills, AZ 85268

Rev. 4/4/07

PLAT 208 POA

INCOME STATEMENT
FOR THE PERIOD ENDING 12/31/2007

	CURRENT PERIOD INCOME	YEAR TO DATE
REGULAR ASSESSMENT INCOME	$ 2,997.90	$ 146,182.67
TRASH COLLECTIONS	463.29	46,090.91
TOTAL ASSESSMENTS	3,461.19	192,273.58
MISCELLANEOUS INCOME		
LATE CHARGES	68.09	740.12
ARCHITECTURAL REVIEW FEE	0.00	1,000.00
PARKING LOT RENTAL	0.00	12,000.00
TRANSFER FEES	75.00	75.00
INTEREST INCOME	436.88	4,254.52
OTHER INCOME	0.00	2,750.00
TTL MISCELLANEOUS INCOME	579.97	20,819.64
TOTAL INCOME	4,041.16	213,093.22

EXPENSES

ADMINISTRATIVE		
REFUNDED SEC DEPOSITS	0.00	2,250.00
LEGAL FEES - GENERAL	0.00	3,483.38
AUDIT EXPENSE	0.00	270.00
MANAGEMENT FEES	2,200.00	26,400.00
OFFICE EXPENSE REIMBURSE	297.71	2,528.61
LICENSING & FEES	0.00	10.00
MISCELLANEOUS EXPENSES	0.00	(250.00)
INSURANCE EXPENSE	0.00	2,984.80
TAXES-CORPORATE & INCOME	0.00	147.40
TOTAL ADMINISTRATIVE EXP	2,497.71	37,824.19

PLAT 208 POA

INCOME STATEMENT
FOR THE PERIOD ENDING 12/31/2007

	CURRENT PERIOD	YEAR TO DATE
POOL EXPENSES		
LICENSE & PERMIT	0.00	43.75
TOTAL POOL EXPENSES	0.00	43.75
COMMONA AREA EXPENSES		
C/A SIGNAGE	0.00	33.75
LANDSCAPE MAINT CONTRACT	1,700.00	20,071.00
LANDSCAPE MAINT NON CONTR	506.00	1,802.00
TRASH REVETMENT	0.00	1,967.11
STREET SWEEPING CONTRACT	650.00	7,800.00
STREETS & PARKING REPAIR	0.00	846.28
TOTAL COMMON AREA EXPENSE	2,856.00	32,520.14
CLUBHOUSE EXPENSE		
UNIT/BUILDING MAINTENANCE		
UTILITY EXPENSES		
WATER	643.92	7,513.67
ELECTRICITY	38.46	456.52
WASTE REMOVAL	4,177.59	51,075.52
TOTAL UTILITY EXPENSE	4,859.97	59,045.71
TOTAL EXPENSES	10,213.68	129,433.79
NET INCOME (LOSS)	(6,172.52)	83,659.43
RESERVE EXPENDITURES		

PREPARED BY: EAGLE COMMERCIAL REALTY SERVICES
602.952.1282

PLAT 208 POA

BALANCE SHEET
FOR THE PERIOD ENDING 12/31/2007

ASSETS

	CASH	
1020-1000	OPERATING CASH- US BANK	12,080.63
1030-1000	OPERATING RSV- US BANK	154,296.68

1099-0000	TOTAL CASH	166,377.31
	ACCOUNTS RECEIVABLE	

	PREPAID EXPENSES	

	FIXED ASSETS	

1989-0000	TOTAL ASSETS	166,377.31
		================

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PLAT 208 POA

BALANCE SHEET
FOR THE PERIOD ENDING 12/31/2007

LIABILITIES

	ACCOUNTS PAYABLE	
2120-0000	DEPOSITS-SECURITY DEP.	16,900.50
2125-0000	DEPOSITS- PARKING LOT	250.00
2130-0000	DEPOSITS - ARCHITECTURAL	4,893.00
2199-0000	TOTAL PAYABLES	22,043.50
2889-0000	TOTAL LIABILITIES	22,043.50
	EQUITY	
2935-0000	FUND BALANCE	60,674.38
2940-0000	CURRENT EARNINGS	83,659.43
2989-0000	TOTAL HOA EQUITY	144,333.81
2999-0000	TTL LIABILITIES & EQUITY	166,377.31

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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.
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, 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 other 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 ____________ **Date** 3/1/08 **Name** Ron Tooelln **Date** 3/1/08

Signature ____________ **Signature** ____________

Title ____________ **Title** President

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