# STATE OF ARIZONA
# CORPORATION COMMISSION

## NONPROFIT CORPORATION ANNUAL REPORT
## & CERTIFICATE OF DISCLOSURE
## FOREIGN / DOMESTIC

**FOR FISCAL YEAR ENDING** 12/31/1995 **DUE ON OR BEFORE** 04/15/1996

**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: -0181649-8
Corporation Name: MONTANA RANCH HOMEOWNERS ASSOCIATION
Address: 401 W BASELINE RD #103

City, State, Zip: TEMPE AZ 85283-
Domicile: ARIZONA
Type: NON-PROFIT

A.C.C. CORPORATIONS DIV.
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DOCUMENTS ARE SUBJECT TO REVIEW BEFORE FILING

Arizona Statutory Agent: SUE E GRAHAM
Street Address: 401 W BASELINE RD #103
(NOT P.O. BOX)

City, State, Zip: TEMPE AZ 85283-

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, |
| 6. __ Political | 13. __ Science/Research | industrial, or trade association |
| 7. __ Religious | 14. __ Hospital/Health Care | 20. X Other Homeowners Association |

| ACC USE ONLY | |
|---|---|
| Fee | $ |
| Penalty | $ |
| Total | $ |

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 __ and go on to Section 6.)

**PRESIDENT:** T W LEWIS
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

**VICE PRESIDENT:** GARY DEAVER
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

**SECRETARY:** JOE GILBERT
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

**TREASURER:** JOE GILBERT
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

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

**NAME:** T W LEWIS
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

**NAME:** GARY DEAVER
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

**NAME:** JOE GILBERT
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

**NAME:** PAM HAINES
Address: 4500 S LAKESHORE DR #750
TEMPE, AZ 85282-
Date taking office: _____

# MONTAÑA RANCH
# BOARD OF DIRECTORS
## Elected November 10, 1995

**Emmett Mitchell** — **President** *(term expires 5/96)*
11889 East Gold Dust Avenue
Scottsdale, AZ 85259
*Lot 88*
*661-1392 - H*
*661-1393 - H/fax*
*953-7980 - W/ext. 118*
*953-7989 - W/Fax*

**Robert Clapper** — **Vice President** *(term expires 5/97)*
10457 North 119th Street
Scottsdale, AZ 85259-5011
*Lot 35*
*661-0609 - H*
*391-0332 - Fax*

**Norma Arlen** — **Secretary** *(term expires 5/97)*
11969 East Gold Dust Avenue
Scottsdale, AZ 85259
*Lot 91*
*661-8320 - H*
*(602) 525-9113 - summer home*
*451-7525 - Fax*

**Arnold J. Diamond** — **Treasurer** *(term expires 5/97)*
9838 North 119th Place
Scottsdale, AZ 85259
*Lot 70*
*860-1959 - H*
*860-1848 - W*

**Larry Fanucchi** — **Director** *(term expires 5/96)*
11929 East Gold Dust Avenue
Scottsdale, AZ 85259
*Lot 89*
*661-0123 - H*
*827-6320 - W*
*827-0419 - W/Fax*

12/28/95

MONTANA RANCH HOMEOWNERS ASSOCIATION

BALANCE SHEET

DECEMBER 31, 1995

| | | | |
|---|---|---|---|
| ASSETS | | | |
| OPERATING FUNDS | | | |
| CASH IN BANK - OPERATING | | $ 6,062.61 | |
| PREPAID ASSESSMENTS | | 3,765.00 | |
| TOTAL OPERATING FUNDS | | | $ 9,827.61 |
| RESERVE FUNDS | | | |
| RESERVE | | 73,889.47 | |
| TOTAL RESERVE FUNDS | | | 73,889.47 |
| OTHER ASSETS | | | |
| ACCOUNTS RECEIVABLE-HOMEOWNERS | | 2,075.00 | |
| TOTAL OTHER ASSETS | | | 2,075.00 |
| TOTAL ASSETS | | | $ 85,792.08 |
| LIABILITIES & HOMEOWNERS EQUITY | | | |
| LIABILITIES | | | |
| ACCOUNTS PAYABLE | | 3,620.48 | |
| PREPAID ASSESSMENTS | | 3,765.00 | |
| TOTAL LIABILITIES | | | 7,385.48 |
| HOMEOWNERS EQUITY | | | |
| RESERVE EQUITY | | | |
| RESERVE FUNDS EQUITY | 71,450.73 | | |
| RESERVE-FUNDED INTEREST | 2,438.74 | | |
| TOTAL RESERVE EQUITY | | 73,889.47 | |
| OPERATING SURPLUS/DEFICIT(-) | | | |
| PRIOR YEAR SURPLUS-DEFICIT | 4,710.13 | | |
| TRF TO/FROM RESERVE EQUITY | 2,968.56- | | |
| CURRENT SURPLUS/DEFICIT(-) | 2,775.56 | | |
| TOTAL SURPLUS/DEFICIT(-) | | 4,517.13 | |
| TOTAL HOMEOWNERS EQUITY | | | 78,406.60 |
| TOTAL LIABILITIES AND HOMEOWNERS EQUITY | | | $ 85,792.08 |

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** _____ **Date** 2/24/94 **By** _____ **Date** _____

**Title** PRESIDENT **Title** _____