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

RECEIVED
FEB 04 1998

DUE ON OR BEFORE 04/24/1998

FILING FEE $10.00

The following information is required by A.R.S. §10-1622 & §10-2501 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. & §10-2545.A. YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. Make changes or corrections where necessary. See instructions for proper format. REFER TO THE INSTRUCTIONS ON PAGE 4.

1. MONTANA RANCH HOMEOWNERS ASSOCIATION
6423 S ASH AVE
TEMPE, AZ 85283-3657

A.C.C. CORPORATIONS DIV RECEIVED APR 9 '98

DOCUMENTS ARE SUBJECT TO REVIEW BEFORE FILING

Corporation File Number: 0181649-8

Business Phone: _____ (Business phone is optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: SUE E GRAHAM
Street Address: 6423 S ASH AVE
(NOT P.O. BOX)
City, State, Zip: TEMPE AZ 85283-3657

ACC USE ONLY	
Fee	$ 10.—
Penalty	$
Reinstate	$
Expedite	$
Total	$ 10.—
FY97-98	

PAID

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.

A.C.C. CORPORATIONS DIV. RECEIVED
AUG 24 1998

A.C.C. CORPORATIONS DIV. RECEIVED
OCT 16 1998

Signature

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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. X 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.

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.

NONE ☐

Name: _____ Name: _____

Name: _____ Name: _____

7. OFFICERS (If no changes since last report, check here __ and go on to Section 8.)

Name: EMMETT MITCHELL
Title: PRESIDENT/CEO
Address: 11889 E GOLD DUST AVE
SCOTTSDALE, AZ 85259-
Date taking office: _____

Name: ROBERT CLAPPER
Title: VICE-PRESIDENT
Address: 10457 N 119TH ST
SCOTTSDALE, AZ 85259-5011
Date taking office: _____

Name: NORMA ARLEN
Title: SECRETARY
Address: 11969 E GOLD DUST AVE
SCOTTSDALE, AZ 85259-
Date taking office: _____

Name: ARNOLD J DIAMOND
Title: TREASURER
Address: 9838 N 119TH PL
SCOTTSDALE, AZ 85259-
Date taking office: _____

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

Name: NORMA ARLEN
Address: 11969 E GOLD DUST AVE
SCOTTSDALE, AZ 85259-
Date taking office: _____

Name: JAN GASTON
Address: 11981 E IRONWOOD DR
SCOTTSDALE, AZ 85259-
Date taking office: _____

Name: EMMETT MITCHELL
Address: 11889 E GOLD DUST AVE
SCOTTSDALE, AZ 85259-
Date taking office: _____

Name: MARVIN TATE
Address: 11944 E BERYL AVE
SCOTTSDALE, AZ 85259-
Date taking office: _____

MONTAÑA RANCH HOMEOWNERS ASSOCIATION
BOARD OF DIRECTORS
Elected May 22, 1997

Emmett Mitchell — **1998**
11889 East Gold Dust Avenue
Scottsdale, Arizona 85259
Lot 88
661-1392 - H
661-1393 - H/fax
953-7980 - W/ext. 118
953-7989 - W/fax
809-5175 - M

Pres.

Herb Streich — **1999**
10453 North 118th Place
Scottsdale, Arizona 85259
Lot 26
860-9666 - H
256-4774 - W

Sec.

Curt Hench — **1999**
10050 North 118th Street
Scottsdale, Arizona 85259
Lot 63
614-1496 - H
614-1497 - [redacted] Fax

Treas.

Marvin Tate — **1998**
11944 East Beryl Avenue
Scottsdale, Arizona 85259
Lot 36
661-8676 - H

Dir. / asst. Treasurer

Geneva Spigner — **1998**
11833 East Beryl Avenue
Scottsdale, Arizona 85259
Lot 48
661-6698

Dir. asst. Secretary

Graham Management, Inc.
Terri McAlevy, Association Manager
6423 South Avenue
Tempe, Arizona 85283
PHONE: 491-1855
FAX: 491-2441

MONTANA RANCH HOMEOWNERS ASSOCIATION

BALANCE SHEET
DECEMBER 31, 1997

ASSETS			
OPERATING FUNDS			
CASH IN BANK-OPERATING		$ 1,308.50	
PREPAID ASSESSMENTS		2,330.00	
TOTAL OPERATING FUNDS			$ 3,638.50
RESERVE FUNDS			
RESERVE		62,138.12	
6 MONTH CD-MATURES 02-21-98		76,086.99	
TOTAL RESERVE FUNDS			138,225.11
OTHER ASSETS			
ACCOUNTS RECEIVABLE-HOMEOWNERS		3,365.00	
TOTAL OTHER ASSETS			3,365.00
TOTAL ASSETS			$ 145,228.61
LIABILITIES & HOMEOWNERS EQUITY			
LIABILITIES			
ACCOUNTS PAYABLE-RECEIVED		3,110.97	
CLUBHOUSE DEPOSIT		500.00	
PREPAID ASSESSMENTS		2,330.00	
TOTAL LIABILITIES			5,940.97
HOMEOWNERS EQUITY			
RESERVE EQUITY			
RESERVE FUNDS EQUITY	127,506.19		
RESERVE-FUNDED INTEREST	10,718.92		
TOTAL RESERVE EQUITY		138,225.11	
OPERATING SURPLUS/DEFICIT(-)			
PRIOR YEAR SURPLUS-DEFICIT	3,905.66		
TRANSFER TO/FROM RES EQUITY	5,800.00		
CURRENT SURPLUS/DEFICIT(-)	8,643.13-		
TOTAL SURPLUS/DEFICIT(-)		1,062.53	
TOTAL HOMEOWNERS EQUITY			139,287.64
TOTAL LIABILITIES AND HOMEOWNERS EQUITY			$ 145,228.61

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-2501.A.6)
Only corporations that meet one or more of the following criteria must **attach** a financial statement (balance sheet including assets, liabilities and equity). The corporation is: 1) a **public service corporation** (e.g., public utility) as defined in Article XV, Section 2, Constitution of Arizona. 2) offers its **stock for sale** in transactions that are not exempt from A.R.S. §§ 44-1841 and 44-1842 as prescribed in §44-1844.A.1 (e.g., publicly traded). 3) a **nonprofit corporation**. All other forms of corporations are exempt from filing a financial disclosure.

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.
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 (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 this report for each person subject to the statement above. 1) The names and addresses 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. **CAUTION**: Signature requirements vary according to the type of corporation. **See the instruction sheet** for specific rules. 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 Emmett E Mitchell **Date** 4-1-98 **Name** Herb Streich **Date** 9.28.98

Signature Emmett Mitchell **Signature** Herb Streich

Title President **Title** Secretary

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

Complete name in print and title