



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

Arizona Corporation Commission



DUE ON OR BEFORE 04/16/2001

FY00-01

02, 99

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.**

-0223265-2

1. **NICA HOMEOWNERS ASSOCIATION, INC.**
% PATTERSON ACCOUNTING INC
13576 W CAMINO DEL SOL #16
SUN CITY WEST, AZ 85375-4427

RECEIVED FEB - 5 2001

RECEIVED

Business Phone: 603-561-5622 (Business phone is optional.)

State of Domicile: **ARIZONA**

Type of Corporation: **NON-PROFIT**

APR 13 2001

2. Arizona Statutory Agent: **PATTERSON ACCOUNTING INC**
Street Address: **13576 W CAMINO DEL SOL #16**
(NOT P.O. BOX)
City, State, Zip: **SUN CITY WEST AZ 85375-4427**

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

7/4 6/18/01

ACC USE ONLY	
Fee	\$ <u>10</u>
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

RECEIVED

JUN 15 2001

3. Secondary Address:

(Foreign Corporations are
REQUIRED to complete
this section.)

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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.

Number of Shares/Certificates Authorized

Class

0223265-2

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.Name: John TofilonName: Lois BeckerTitle: PRESIDENTTitle: VICE PRESIDENTAddress: 18503 MICA
SUN CITY WEST, AZ 85375Address: 13281 COUNTRYSIDE
SUN CITY WEST, AZ 85375Date taking office: 1/1/00Date taking office: 9/00Name: Dean Klopp

Name: _____

Title: SECRETARY & TREASURER

Title: _____

Address: 13338 Bolero
SUN CITY WEST, AZ 85375

Address: _____

Date taking office: 1/1/00

Date taking office: _____

8. DIRECTORS Please Type or Print Clearly.Name: John TofilonName: Lois BeckerAddress: 18503 MICA
SUN CITY WEST, AZ 85375Address: 13281 COUNTRYSIDE
SUN CITY WEST, AZ 85375Date taking office: 1/1/00Date taking office: 9/00Name: Dean Klopp

Name: _____

Address: 13338 Bolero
SUN CITY WEST, AZ 85375

Address: _____

Date taking office: 1/1/00

Date taking office: _____

Printed: 12/31/00

BALANCE SHEET
CA HOMEOWNERS ASSOCIATION
Prepared For MICA HOMEOWNERS ASSOCIATION
December 2000

Page 1

FILE

1000	BANK ONE - CHECKING	9,889.80
1200	WELLS FARGO (MM) PTG/PV RES	8,097.14
1201	WELLS FARGO (CD) PTG/PV RES	23,000.00
1202	WELLS FARGO (CD) PTG/PV RES	6,000.00
1205	SUN CITY BK (CLSD 5/00)	0.00
1212	WORLD SVGS-CD (CLSD 5/00)	0.00
1213	SUN CITY BK-CD (CLSD 6/00)	0.00
1215	PETTY CASH	0.00

TOTAL ASSETS

44,986.94

3000	RETAINED EARNINGS	36,880.48
3030	Current Year Earnings/Loss	8,106.46

TOTAL CAPITAL

44,986.94

TOTAL LIABILITIES + CAPITAL

44,986.94

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)

Nonprofit corporations **must attach** a financial statement (balance sheet including assets, liabilities and equity). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11622.A.6) Nonprofit Corporations Only:

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 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 profit 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 (A.R.S. §§10-202.D.2 & 10-3202.02)

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? [Underlined portion pertains to profit corporations only]

One box must be marked:

YES ☐

NO ☒

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 incorporated or transacted business. 3) The dates of corporate operation.

12. SIGNATURES

CAUTION: Annual Reports must be signed by a duly authorized officer. 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 John Tofilon Date 4/4/01 Name _____ Date _____

Signature [Signature] Signature _____

Title Pres. Devo Title _____

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