AZ Corp. Commission

00749696

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

WEB FORM COPY

DUE ON OR BEFORE 04/27/2003 FY02-03 **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.

A.C.C. CORPORATIONS DIV.
RECEIVED
MAY 0 7 2003
CD

DOCUMENTS ARE SUBJECT TO REVIEW BEFORE FILING

1. -0230518-8
9228 HOMEOWNERS' ASSOCIATION, INC.
2916 N 7TH AVE #100
PHOENIX, AZ 85013

Business Phone:_____ (Business phone is optional)
State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

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ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

2. Statutory Agent: HARVEY PLATT
Mailing Address: 2916 N 7TH AVE
City, State, Zip: PHOENIX, AZ 85013

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

no 87.34.03

ACC USE ONLY	
Fee	$ 10
Penalty	$
Reinstate	$
Expedite	$
Resubmit	$

IPR 5-8

590720 636149

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

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. 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 PRINT OR TYPE CLEARLY.

Name: _____ **Name:** _____

NONE ☒

Name: _____ **Name:** _____

7. OFFICERS PLEASE PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: Jerry Walp
Title: President
Address: 2916 N. 7th Ave
Phoenix, AZ 85013
Date taking office: _____

Name: Harvey Platt
Title: Treasurer
Address: 2916 N 7th Av
Phoenix, AZ 85013
Date taking office: _____

Name: Judy Walp
Title: Secretary
Address: 2916 N 7th Av
Phoenix, AZ 85013
Date taking office: _____

Name: _____
Title: _____
Address: _____
Date taking office: _____

8. DIRECTORS PLEASE PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: Judy Walp
Address: same
Date taking office: _____

Name: Harvey Platt
Address: same
Date taking office: _____

Name: Jerry Walp
Address: same
Date taking office:

Name: _____
Address: _____
Date taking office:

Edward Recker, Ltd.

Certified Public Accountant

393 West Warner Road
Suite 118
Chandler, Arizona
Post Office Box 11115
Sun Lakes, Arizona 85248
Phone 480 / 857-1971
Fax 480 / 857-1973

Board of Directors
9228 Homeowners' Association, Inc.
Phoenix, Arizona

I have compiled the accompanying financial statement for the 9228 Homeowners' Association, Inc. as of December 31, 2002, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. All information included in this financial statement is the representation of the management of 9228 Homeowners' Association, Inc.

A compilation is limited to presenting in the form of financial statements information that is the representation of management. I have not audited or reviewed the accompanying financial statement and, accordingly, do not express an opinion or any other form of assurance on it.

Management has elected to omit substantially all of the disclosures required by generally accepted accounting principles. If the omitted disclosures were included in the financial statement, they might influence the user's conclusion about the Homeowners' Association financial position, results of operations and changes in financial position. Accordingly, this statement is not designed for those who are not informed about such matters.

Edward Recker Ltd.

Certified Public Accountant

July 17, 2002

9228 HOMEOWNERS' ASSOCIATION, INC.
FINANCIAL STATEMENT
DECEMBER 31, 2002
(See Accountant's Compilation Report)

A S S E T S

CASH IN BANK	
Checking	$ 8,507
Savings	4,277
	$12,784

L I A B I L I T I E S

FUND BALANCE	$12,784

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, 10-3202.02, 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 shareholder).
2. The state in which each corporation was ill incorporated or transacted business.
3. The status 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 JERRY L. WALP **Date** 4-29-03 **Name** Judy Walp **Date** 4-29-03

Signature Jerry L Walp **Signature** Judy Walp

Title PRESIDENT **Title** Secretary

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