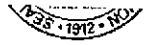




WEB FORM COPY

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

AZ Corp. Commission 01511235



DUE ON OR BEFORE 04/01/2006

FY05-06

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. -0231448-4 SKY HAWK DRIVE HOMEOWNERS ASSOCIATION, INC. 6303 S RURAL RD #3 TEMPE, AZ 85283

RECEIVED MAR 20 2006 ARIZONA CORR. COMMISSION CORPORATIONS DIVISION

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

2. Statutory Agent: MARK VANDER STOEP Physical Address, if Different: Mailing Address: 6303 S RURAL RD #6 Physical Address: City, State, Zip: TEMPE, AZ 85283 City, State, Zip:

ACC USE ONLY Fee \$10 Penalty \$ Reinstatement \$ 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. Manufacturing, 20. Mining, 21. News Media, 22. Pharmaceutical, 23. Publishing/Printing, 24. Ranching/Livestock, 25. Real Estate, 26. Restaurant/Bar, 27. Retail Sales, 28. Science/Research, 29. Sports/Sporting Events, 30. Technology(Computers), 31. Technology(General), 32. Television/Radio, 33. Tourism/Convention Services, 34. Transportation, 35. Utilities, 36. Veterinary Medicine/Animal Care, 37. 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

SKY HAWK DRIVE HOMEOWNERS ASSOCIATION, INC

OFFICERS:

MELVIN ROSELMAN (PRES)
SANDRA PETERSEN (SEC/TREAS)

ELECTED:

12/1/05
12/1/05

All addresses are P.O. Box 25466, Tempe, Arizona 85285-5466

DIRECTORS:

MELVIN ROSELMAN
SANDRA PETERSEN

ELECTED:

12/1/05
12/1/05

All addresses are P.O. Box 25466, Tempe, Arizona 85285-5466

12/31/2005
7:52 AM

SKY HAWK INC
BALANCE SHEET
AS OF DEC 31, 2005

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ASSETS

BANK ONE OPERATING ACCOUNT	5,706.56
BANK ONE MM 38120921	<u>5,189.66</u>
TOTAL ASSETS	10,896.22

LIABILITIES

TOTAL LIABILITIES	<u>.00</u>
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NET ASSETS	<u>10,896.22</u>
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CAPITAL/EQUITY

RESERVE ALLOCATIONS

414 MISC LANDSCAPING	2,096.98
415 IRRIGATION	<u>18,343.30</u>
TOTAL RESERVE ALLOCATIONS	20,440.28

PREPAID ASSESSMENTS IN 2004	5,426.00
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PREV YR(S) SURPLUS/SHORTFALL	14,008.26
CURRENT SURPLUS/SHORTFALL	<u>961.80</u>

TOTAL CAPITAL/EQUITY	<u>10,896.22</u>
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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. | 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, 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 <u>Meloni Buehler</u> Date <u>3/17/09</u>	Name _____ Date _____
Signature <u>Meloni Buehler</u>	Signature _____
Title <u>President</u>	Title _____