



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

Arizona Corporation Commission



00004493

DUE ON OR BEFORE 04/21/1999

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.

RECEIVED

1. TROON RIDGE ESTATES UNITS III AND IV HOMEOWNERS' ASSOCIATION
% AMCOR PROPERTY PROFESSIONALS
15757 N 78TH ST STE A
SCOTTSDALE, AZ 85260

✓ MAR 24 1999

ARIZONA CORR COMMISSION
CORPORATIONS DIVISION

-0236606-9

Business Phone: _____

Corporation File Number: _____

(Business phone is optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: AMCOR PROPERTY PROFESSIONALS
Street Address: 15757 N 78TH ST STE A
(NOT P.O. BOX)
City, State, Zip: SCOTTSDALE AZ 85260-

Use this box only if appointing a new Statutory Agent

| ACC USE ONLY | |
|--------------|----------|
| Fee | \$ _____ |
| Penalty | \$ _____ |
| Renstate | \$ _____ |
| Expedite | \$ _____ |
| Total | \$ _____ |
| FY98-99 | |

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

- | | |
|---|--|
| <input type="checkbox"/> 1. Accounting | <input type="checkbox"/> 20. Manufacturing |
| <input type="checkbox"/> 2. Advertising | <input type="checkbox"/> 21. Mining |
| <input type="checkbox"/> 3. Aerospace | <input type="checkbox"/> 22. News Media |
| <input type="checkbox"/> 4. Agriculture | <input type="checkbox"/> 23. Pharmaceutical |
| <input type="checkbox"/> 5. Architecture | <input type="checkbox"/> 24. Publishing/Printing |
| <input type="checkbox"/> 6. Banking/Finance | <input type="checkbox"/> 25. Ranching/Livestock |
| <input type="checkbox"/> 7. Barbers/Cosmetology | <input type="checkbox"/> 26. Real Estate |
| <input type="checkbox"/> 8. Construction | <input type="checkbox"/> 27. Restaurant/Bar |
| <input type="checkbox"/> 9. Contractor | <input type="checkbox"/> 28. Retail Sales |
| <input type="checkbox"/> 10. Credit/Collection | <input type="checkbox"/> 29. Science/Research |
| <input type="checkbox"/> 11. Education | <input type="checkbox"/> 30. Sports/Sporting Events |
| <input type="checkbox"/> 12. Engineering | <input type="checkbox"/> 31. Technology(Computers) |
| <input type="checkbox"/> 13. Entertainment | <input type="checkbox"/> 32. Technology(General) |
| <input type="checkbox"/> 14. General Consulting | <input type="checkbox"/> 33. Television/Radio |
| <input type="checkbox"/> 15. Health Care | <input type="checkbox"/> 34. Tourism/Convention Services |
| <input type="checkbox"/> 16. Hotel/Motel | <input type="checkbox"/> 35. Transportation |
| <input type="checkbox"/> 17. Import/Export | <input type="checkbox"/> 36. Utilities |
| <input type="checkbox"/> 18. Insurance | <input type="checkbox"/> 37. Veterinary Medicine/Animal Care |
| <input type="checkbox"/> 19. Legal Services | <input type="checkbox"/> 38. Other _____ |

NON-PROFIT CORPORATIONS

- | |
|---|
| <input type="checkbox"/> 1. Charitable |
| <input type="checkbox"/> 2. Benevolent |
| <input type="checkbox"/> 3. Educational |
| <input type="checkbox"/> 4. Civic |
| <input type="checkbox"/> 5. Political |
| <input type="checkbox"/> 6. Religious |
| <input type="checkbox"/> 7. Social |
| <input type="checkbox"/> 8. Literary |
| <input type="checkbox"/> 9. Cultural |
| <input type="checkbox"/> 10. Athletic |
| <input type="checkbox"/> 11. Science/Research |
| <input type="checkbox"/> 12. Hospital/Health Care |
| <input type="checkbox"/> 13. Agricultural |
| <input type="checkbox"/> 14. Animal Husbandry |
| <input checked="" type="checkbox"/> 15. Homeowner's Association |
| <input type="checkbox"/> 16. Professional, commercial industrial or trade association |
| <input type="checkbox"/> 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) |
|--|-------|------------------------------|
| <u>N/A</u> | | |
| | | |

| 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.

Name: _____ Name: _____

NONE

Name: _____ Name: _____

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

| | |
|---|--|
| Name: <u>MIKE WALDERMAN</u> | Name: <u>BOB PARADIS</u> |
| Title: <u>PRESIDENT/CEO</u> | Title: <u>VICE-PRESIDENT</u> |
| Address: <u>11334 E TROON VISTA DR</u> | Address: <u>11413 E BLACK ROCK RD</u> |
| <u>SCOTTSDALE, AZ 85255</u> | <u>SCOTTSDALE, AZ 85255</u> |

Date taking office: ~~10-02-97~~Date taking office: ~~10-02-97~~

| | |
|---|----------------------------------|
| Name: <u>GREGG SAMMONS</u> | Name: <u>GREGG SAMMONS</u> |
| Title: <u>SECRETARY</u> | Title: <u>TREASURER</u> |
| Address: <u>23955 N 112TH ST</u> | Address: <u>23955 N 112TH ST</u> |
| <u>SCOTTSDALE, AZ 85255</u> | <u>SCOTTSDALE, AZ 85255</u> |

Date taking office: ~~10-02-97~~Date taking office: ~~10-02-97~~**8. DIRECTORS** (If no changes since last report, check here ___ and go on to Section 9.)

| | |
|--|---|
| Name: <u>BOB PARADIS</u> | Name: <u>MIKE WALDERMAN</u> |
| Address: <u>11413 E BLACK ROCK RD</u> | Address: <u>11334 E TROON VISTA DR</u> |
| <u>SCOTTSDALE, AZ 85255</u> | <u>SCOTTSDALE, AZ 85255</u> |

Date taking office: ~~10-02-97~~Date taking office: ~~10-02-97~~

| | |
|----------------------------------|----------------|
| Name: <u>GREGG SAMMONS</u> | Name: _____ |
| Address: <u>23955 N 112TH ST</u> | Address: _____ |
| <u>SCOTTSDALE, AZ 85255</u> | |

Date taking office: ~~10-02-97~~

Date taking office: _____

TROON RIDGE ESTATES UNIT III AND IV HOMEOWNERS' ASSOCIATION
FILE ID #0236606-9

March 1, 1999

Please make the following corrections to the 1998 officers and directors.

OFFICERS:

President

Bonnie Hall
24001 N. 112th Way
Scottsdale, AZ 85255
Elected 03-24-98

Vice President

Secretary

Hyla Miller
11343 E. Mariposa Grande
Scottsdale, AZ 85255
Elected 03-24-98

Treasurer

Lee Alton
23651 N. 112th Place
Scottsdale, AZ 85255
Elected 11-10-98

DIRECTORS:

Hyla Miller

11343 E. Mariposa Grande
Scottsdale, AZ 85255
Elected 03-24-98

Lee Alton

23651 N. 112th Place
Scottsdale, AZ 85255
Elected 11-10-98

Bonnie Hall

24001 N. 112th Way
Scottsdale, AZ 85255
Elected 03-24-98

BALANCE SHEET - TROON RIDGE ESTATES III & IV
December, 1998

01/25/99
1:43 PM

PREPARED FOR :

TROON RIDGE ESTATES III
15757 N. 78TH ST STE A
SCOTTSDALE, AZ 85260

PREPARED BY :

AMCOR PROP PROF., INC
15757 N. 78TH ST STE A
SCOTTSDALE, AZ 85260

ASSETS

CURRENT ASSETS

Operating Acct-Bk of Ame 37,379.63
Architectural Fees 994.56

TOTAL CURRENT ASSETS 38,374.19

TOTAL ASSETS 38,374.19

MEMBER'S EQUITY

LIABILITIES

Prepaid Maint.Fees 18,450.00

TOTAL LIABILITIES 18,450.00

MBR Equity-Prior Periods 26,463.52
Current Earnings(Losses) -6,539.33

TOTAL MEMBERS EQUITY 38,374.19

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

Only 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 & 10-2505.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. | 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)

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. 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 Bonnie L. Hare Date 3/1/99 Name _____ Date _____

Signature Bonnie L. Hare Signature _____

Title Pres. H.O.A. Title _____

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