



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

Arizona Corporation Commission



00392391

DUE ON OR BEFORE 04/19/2001

FT00-01

FILING FEE \$10.00

The following information is required by A.R.S. §§10-1022 & 10-11022 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. 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.**

1. -0242582-7

VISTA CASITA HOMEOWNERS ASSOCIATION, INC

~~1. STEPHEN R LAUTERBACH~~

~~8502 E VIA DE VENTURA #105~~

~~SCOTTSDALE, AZ 85258~~

70 Fen Meade Condo Mgmt
14991 N. Boswell Blvd.
Sun City, AZ 85351

RECEIVED

JUL 03 2001

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: _____

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2.

Arizona Statutory Agent:

STEPHEN R LAUTERBACH

Street Address:

8502 E VIA DE VENTURA #105

SCOTTSDALE, AZ 85258

City, State, Zip:

Betty J. Campbell
Kylie Humble
14991 N. Boswell Blvd.
Sun City, AZ 85351
9362 E RAYHALL DR.
Scottsdale, AZ 85260

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$10

Penalty \$

Reinstatement \$

Expedites \$

Resubmit \$

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.

Betty J. Campbell
Signature of new Statutory Agent

RECEIVED

SEP 12 2001

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

3. Secondary Address:

305956

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. Barber/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 H.O.A. |

RECEIVED

OCT 24 2001

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

5. CAPITALIZATION:

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate.

0242582-7

Number of Shares/Certificates Authorized

Class

Series Within Class (If any)

Number of Shares/Certificates Issued

Class

Series Within Class (If any)

6. SHAREHOLDERS:

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

PLEASE TYPE OR PRINT CLEARLY.

Name: _____

Bobby Gregg

Name: _____

Glenn Clark

Title: _____

President

Title: _____

Treasurer

Address: _____

21735 N. Verde Ridge Dr
Sun City West AZ

Address: _____

21728 Limousine Dr
Sun City AZ 85375

Date taking office: _____

2-16-2001

Date taking office: _____

2-18-01

Name: _____

Name: _____

Loreen A. Larson

Title: _____

Title: _____

Secretary

Address: _____

Address: _____

21732 N Limousine Dr
Sun City West AZ 85375

Date taking office: _____

Date taking office: _____

2-18-01

8. DIRECTORS

PLEASE TYPE OR PRINT CLEARLY.

Name: _____

Loreen A. Larson

Name: _____

Leslie Griffin

Address: _____

21732 N. Limousine Dr
Sun City West AZ 85375

Address: _____

21739 N. Verde Ridge Dr
Sun City West, AZ 85375

Date taking office: _____

2-18-2001

Date taking office: _____

2-18-01

Name: _____

Name: _____

Address: _____

Address: _____

Date taking office: _____

Date taking office: _____

**VISTA CASITA
BOARD OF DIRECTORS**

SUN CITY WEST OFFICE

0 747582-7

Bobby Gregg
21735 Verde Ridge Dr.
Sun City West, AZ 85375

President
Term 2003

H-623-546-3556

Kathleen Dolniak
21730 Limousine Dr.
Sun City West, AZ 85375

Vice President
Term 2002

H-623-214-9557

Gleaz Clark
21728 Limousine Dr.
Sun City West, AZ 85375

Treasurer
Appointed to 2002

H-623-544-1061

Loreen Larson
21732 Limousine Dr.
Sun City West, AZ 85375

Secretary
Term 2003

Leslie Griffin
21739 Verde Ridge Dr.
Sun City West, AZ 85375

Member at Large
Term 2002

H-623-546-6973

Created 10/3/00

Updated 2/26/01 - removed Smith, added Clark, re-elected Gregg and Larson.

03/31/2001
5:05 PM

Page: 1

O ROSSMAR & GRAHAM CAM
P.O. BOX 11289
PHOENIX AZ 85061

-0742982-7

ASSETSOPERATING FUNDS
OPERATING BANK ONE ARIZONA

7,952.07

TOTAL OPERATING FUNDS

7,952.07

SAVINGS / RESERVES

RESERVE BANK ONE ARIZONA
RESERVE ML READY ASSET TRUST

4,941.01

41,198.64

TOTAL SAVINGS / RESERVE

46,139.55

TOTAL ASSETS

54,091.72

LIABILITIES & EQUITY**LIABILITIES**

DUE TO MANAGEMENT COMPANY

15.00

TOTAL LIABILITIES

15.00

RESERVE

RESERVE DRIVES & ALLEYS

1,275.00

RESERVE FENCE

332.00

RESERVE GENERAL

40,540.63

RESERVE INTEREST

33.02

RESERVE PAINTING

3,959.00

TOTAL RESERVE

46,139.65

OPERATING SURPLUS (DEFICIT)

RETAINED EARNINGS

1,733.94

CURRENT SURPLUS/ (DEFICIT)

6,203.13

TOTAL SURPLUS/ (DEFICIT)

7,937.07

TOTAL LIABILITIES & EQUITY

54,091.72

Please Enter Corporation Name: _____

Page 3

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. **02 425827**

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.5 & 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 date in which each corporation was incorporated; (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 certificates, including any attachments, and to the best of my (our) knowledge and belief they are true, correct and complete.

Name **BOBBY A. GREGG** ^{BOB} Date **June 30** Name _____ Date _____

Signature **Bobby A. Gregg** Signature _____

Title **President** Title _____

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