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

AZ Corp. Commission
00735154

DUE ON OR BEFORE 06/05/2003 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.

1. -0503436-0
CASAS DEL PANTANO HOMEOWNERS ASSOCIATION, INC.
625 S PRUDENCE RD #104
TUCSON, AZ 85710

RECEIVED
MAY 16 2003
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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

2. Statutory Agent: AARON SEVERSON
Mailing Address: 625 S PRUDENCE RD #104
City, State, Zip: TUCSON, AZ 85710

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

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NO#7803

ACC USE ONLY APR 5-21-03
Fee $10
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

597584 623147

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 Type or Print Clearly.**

Name: _____ **Name:** _____

NONE ☒

Name: _____ **Name:** _____

7. OFFICERS **Please Type or Print Clearly. You Must List at Least One.**

Name: Shirley Soucek
Title: Secretary
Address: 625 S. Prudence Rd. #107
Tucson, Az. 85730
Date taking office: 3/15/98

Name: Aaron D. Severson
Title: President
Address: 625 S. Prudence Rd. #104
Tucson, AZ 85710
Date taking office: 3/15/98

Name: Richard Ivanecky
Title: Vice-President
Address: 625 S. Prudence Rd. #209
Tucson, Az. 85710
Date taking office: 3/15/98

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

8. DIRECTORS **Please Type or Print Clearly. You Must List at Least One.**

Name: Jose Guzman
Address: 625 S. Prudence Rd. #106
Tucson, Az. 85710
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

CASA DEL PANTANO HOMEOWNERS ASSOCIATION
625 S. PRUDENCE ROAD
TUCSON, ARIZONA 85710

ANNUAL FINANCIAL REPORT
JAN. 1, 2002 – DEC. 31, 2002

EXPENSES		INCOME	
WATER TRASH PICK-UP	$ 6,576.32	HOMEOWNERS FEES	$ 21,600.00
LANDSCAPING	$ 3,449.70	LAUNDRY INCOME	$ 600.00
PEST CONTROL	$ 345.60	INTEREST INCOME	$ 50.00
BOOKEEPING	$ 1,200.00	LATE FEES	$ 85.00
ELECTRICITY	$ 2,795.32	TRANSFER FEES	$ 200.00
POOL MAINT.	$ 1,020.00		
MISC. TAXES, INSURANCE MAINT. AND REPAIRS	$ 10,676.96		
TOTAL EXPENSES:	$ 26,063.90	TOTAL INCOME:	$ 22,535.00

CHECKING ACCOUNT BALANCE 12-31-02 $ 3,294.54

CARPORT SAVINGS BALANCE 12-31-02 $ 8,430.22

. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9)
lonprofit corporations **must attach** a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other orms of corporations are exempt from filing a financial disclosure.

A. MEMBERS (A.R.S. § 10-11622.A.6) Only Nonprofit Corporations must answer this question.
This corporation **DOES** ☐ **DOES NOT** ☒ have members.

0. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-11622.A.7)
las ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or person controlling or holding more than 0% 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]

. 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?
. 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?
. 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** ☒

f "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** ☒

f "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.
. The names and addresses of each corporation and the person or persons involved. (e.g. officer, director, trustee or major stockholder)
. The state in which each corporation was a) incorporated b) transacted business.
. The dates of corporate operation.
. 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.
. Date, Case number and Court where the bankruptcy was filed or receiver appointed.
. 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.

declare, under penalty of law that all corporate income tax returns required by Title 43 of the Arizona Revised Statutes have been iled 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 AARON D SEVERSON Date 4/6/03 Name _____ Date _____

Signature Aaron D Severson Signature _____

Title President Title _____

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