AZ Corp. Commission

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WEB FORM COPY

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

DUE ON OR BEFORE 06/05/2005 FY04-05 **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.

RECEIVED
MAR 2 4 2006
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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

RECEIVED
JUN 2 7 2006
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

*** DELINQUENT ANNUAL REPORT 10/05/2005: CONTACT THE COMMISSION AT 602-542-3285!**

Business Phone: 520-624-1206 (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: C/O ADAM, LLC
City, State, Zip: 516 E. FORT LOWELL RD TUCSON AZ 85705

IPR 3/24/06

ACC USE ONLY
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

William Maguire

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. 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 PRINT OR TYPE CLEARLY.

5a. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized.**

Number of Shares/Certificates **Authorized** 24 Class Series Within Class (if any)

5b. 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.**

Number of Shares/Certificates **Issued** 24 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.

NONE ■

Name: _____ **Name:** _____

Name: _____ **Name:** _____

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

Name: Margaret Gueringer-Blask
Title: President Margaret Blask
Address: 625 S. Prudence Rd #207
Tucson, AZ 85710
Date taking office: 22 MAR 2006

Name: Carolyn Almodova
Title: Secretary
Address: 625 S. Prudence, #107
Tucson, AZ 85710
Date taking office: 3-22-06

Name: Elue Ruff
Title: TREASURER
Address: 625 SOUTH PRUDENCE RD #111
TUCSON AZ 85710
Date taking office: _____

Name: Mary Jane Soules
Title: Vice President
Address: 625 S. Prudence Rd unit 110
Tucson. Ay. 85710
Date taking office: 3/22/06

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

Name: Evelyn Marty
Address: 625 S. Prudence Rd #211
Tuc. AZ 85710
Date taking office: 3-22-06

Name: _____
Address: _____
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

Name: _____
Address: _____
Date taking office: _____

Casas Del Pantano Homeowners Assn.
Profit & Loss
January through December 2005

	Jan - Dec 05
Ordinary Income/Expense	
Income	
Homeowners	
Deposits	1,770.00
Fees	26,478.52
Total Homeowners	28,248.52
Total Income	28,248.52
Expense	
Bank Service Charges	14.00
Insurance	
Liability Insurance	6,377.00
Total Insurance	6,377.00
Landscaping	4,800.00
Licenses and Permits	91.00
Pest Control	96.00
Postage and Delivery	37.00
Printing and Reproduction	0.90
Professional Fees	
Accounting	900.00
Legal Fees	56.25
Total Professional Fees	956.25
Repairs	
Building Repairs	825.00
Electrical	230.00
Plumbing	50.00
Pool	1,717.50
Total Repairs	2,822.50
Returned Checks	85.00
Supplies	185.98
Taxes	
Pima County	8.23
Total Taxes	8.23
Towing & Recovery	100.00
Utilities	
Gas and Electric	2,188.50
Water	6,017.86
Total Utilities	8,206.36
Void	0.00
Total Expense	23,780.22
Net Ordinary Income	4,468.30
Net Income	4,468.30

Casas Del Pantano Homeowners Assn.
Balance Sheet
As of December 31, 2005

	Dec 31, 05
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Bank Arizona, N.A.	12,147.12
Total Checking/Savings	12,147.12
Total Current Assets	12,147.12
TOTAL ASSETS	**12,147.12**
LIABILITIES & EQUITY	
Equity	
Opening Bal Equity	8,078.82
Retained Earnings	-400.00
Net Income	4,468.30
Total Equity	12,147.12
TOTAL LIABILITIES & EQUITY	**12,147.12**

Casas Del Pantano Homeowners Assn.
Profit & Loss
December 30, 2004 through January 4, 2006

		Dec 30, '04 - Jan 4, 06
Ordinary Income/Expense		
Income		
Homeowners		
Deposits	1,770.00	
Fees	26,478.52	
Total Homeowners		28,248.52
Total Income		28,248.52
Expense		
Bank Service Charges		14.00
Landscaping		5,200.00
Licenses and Permits		91.00
Pest Control		96.00
Postage and Delivery		37.00
Printing and Reproduction		0.90
Professional Fees		
Accounting	900.00	
Legal Fees	56.25	
Total Professional Fees		956.25
Repairs		
Building Repairs	825.00	
Electrical	230.00	
Plumbing	50.00	
Pool	1,872.50	
Total Repairs		2,977.50
Returned Checks		85.00
Supplies		185.98
Taxes		
Pima County	8.23	
Total Taxes		8.23
Towing & Recovery		100.00
Utilities		
Gas and Electric	2,188.50	
Water	6,017.86	
Total Utilities		8,206.36
Void		0.00
Total Expense		17,958.22
Net Ordinary Income		10,290.30
Net Income		10,290.30

Casas Del Pantano Homeowners Assn.
Balance Sheet
As of January 4, 2006

	Jan 4, 06
ASSETS	
Current Assets	
Checking/Savings	
Wells Fargo Bank Arizona, N.A.	11,992.12
Wells Fargo Savings Account	6,377.00
Total Checking/Savings	18,369.12
Total Current Assets	18,369.12
TOTAL ASSETS	**18,369.12**
LIABILITIES & EQUITY	
Equity	
Opening Bal Equity	8,078.82
Retained Earnings	10,445.30
Net Income	-155.00
Total Equity	18,369.12
TOTAL LIABILITIES & EQUITY	**18,369.12**

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.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 Margaret Gueringer-Blaske Date 22 Mar 04 Name _____ Date _____

Signature _____ Signature _____

Title President Title _____

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