



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



DUE ON OR BEFORE 04/19/1999

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.**

- COUNTRY CLUB MANOR HOMEOWNER'S ASSOCIATION, INC.  
% TUCSON REALTY & TRUST CO  
PO BOX 57610  
TUCSON, AZ 85732-7610

Business Phone: 520-327-0009 Corporation File Number: -0503706-3  
(business phone is optional)  
 State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

- Arizona Statutory Agent: PETER CASEY  
Street Address: 4803 E. 5TH ST #103  
(NOT P.O. BOX) PO BOX 57610  
City, State, Zip: TUCSON AZ 85732-7610

ACC USE ONLY	
Fee	\$ <u>10</u>
Penalty	\$ _____
Reinstate	\$ _____
Expedite	\$ _____
Total	\$ _____
FY98-99	

**PAID**

*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

**RECEIVED**

- Secondary Address:  
(Foreign Corporations are REQUIRED to complete this section.)

MAR 29 1999

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

- 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)

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: LARRY COPELAND

Title: PRESIDENT/CEO

Address: 2935 E 17TH ST  
TUCSON, AZ 85716-

Date taking office: 01-15-97

Name: DEBBIE RHEIN

Title: VICE-PRESIDENT

Address: 3033 E 17TH ST  
TUCSON, AZ 85716-

Date taking office: 01-15-97

Name: TERRY MALONE

Title: SECRETARY

Address: 7700 S AVENIDA DE PINA  
TUCSON, AZ 85716-

Date taking office: \_\_\_\_\_

Name: TERRY MALONE

Title: TREASURER

Address: 7700 S AVENIDA DE PINA  
TUCSON, AZ 85716-

Date taking office: \_\_\_\_\_

8. **DIRECTORS** (If no changes since last report, check here \_\_\_ and go on to Section 9.)

Name: BETTY FINE

Address: 3001 E 17TH ST

TUCSON, AZ 85716-

Date taking office: 01-15-97

Name: BETH MINER

Address: 2965 E 17TH ST

TUCSON, AZ 85716-

Date taking office: \_\_\_\_\_

Name: DALE ERVING

Address: 3029 E 17TH ST

TUCSON, AZ 85716-

Date taking office: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_

SEE ATTACHED

*Maria*

January 26, 1999

COUNTRY CLUB MANOR HOMEOWNERS ASSOCIATION  
EAST 17TH ST.  
TUCSON, AZ 85716 51 CONDOMINIUM UNITS

*1-15-99*

1999 BOARD OF DIRECTORS

PRESIDENT	Betty Fine	3001 E. 17th St.	325-4332 (H)
VICE PRES	Frank Rojas	3003 E. 17th St.	319-9070 (H)
SECRETARY	Kathleen Dugan	4311 E. Ebony Lane	318-1913 (H)
TREASURER	Dale Erving	3029 E. 17th St.	573-7080 EXT 214 (W)
DIRECTOR	Jonathon Burnworth	2907 E. 17th St.	321-1108 (H)
	<i>Betty FINE</i>	<i>3001 E. 17th St</i>	<i>325-4332</i>
	<i>FRANK ROJAS</i>	<i>3003 E. 17th St</i>	<i>319-9070</i>

BALANCE SHEET - COUNTRY CLUB MANOR  
DECEMBER 1998

12/30/98  
5:16 PM

PREPARED FOR :  
COUNTRY CLUB MANOR  
FOR REPORTS ONLY  
TUCSON, AZ

PREPARED BY :  
TUCSON REALTY & TRUST  
PO BOX 57610  
TUCSON, AZ 85732-7610  
(520) 327-0009

ASSETS	
Cash	
Cash-Checking	300.00
Cash in Bank-2	2,839.31
Cash in Bank-3	3,825.78
Cash in Bank-4	1,887.02
Petty Cash	50.00
	-----
Total Cash	8,902.11
<b>TOTAL ASSETS</b>	<b>8,902.11</b>
	=====
LIABILITIES & CAPITAL	
Capital	
Prev yrs transfer to	33.50
Previous yrs interest	794.93
Interest Earned	359.21
Savings to checking (JE)	-45,722.84
Tran savings to checking	45,722.84
Tran checking	37,806.16
Checking to savings (JE)	-37,806.16
Bank Charges Saving Acct	72.75
Retained Earnings	7,854.22
	-----
Total Equity	8,902.11
<b>TOTAL LIAB. &amp; CAPITAL</b>	<b>8,902.11</b>
	=====

**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 corporation is 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 BETTY FINE Date 3/10/99 Name \_\_\_\_\_ Date \_\_\_\_\_

Signature Betty Fine Signature \_\_\_\_\_

Title President Title \_\_\_\_\_

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