



**STATE OF ARIZONA
CORPORATION COMMISSION**



**NONPROFIT CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE
FOREIGN / DOMESTIC**

FOR FISCAL YEAR ENDING 12/31/1996

DUE ON OR BEFORE 04/15/1997

The following information is required by A.R.S. §10-1081 for all domestic and foreign nonprofit corporations authorized to conduct affairs in Arizona. The Commission's authority to prescribe this form is A.R.S. §10-1092. MAKE CHANGES OR CORRECTIONS WHERE NECESSARY.

Corporation File: -0512218-4
Corporation Name: PALOMA DEL SOL HOMEOWNERS ASSOCIATION
Address: 7355 N ORACLE #110

RECEIVED

FEB 24 1997

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

City, State, Zip: TUCSON AZ 85704-
Domicile: ARIZONA
Type: NON-PROFIT

Arizona Statutory Agent: F MICHAEL CADDEN
Street Address: 7355 N ORACLE #110
(NOT P.O. BOX)

City, State, Zip: TUCSON AZ 85704-

1. Check the one category below which best describes the CHARACTER OF AFFAIRS conducted by your corporation in Arizona.

- | | | |
|---|---|--|
| 1. <input type="checkbox"/> Charitable | 8. <input type="checkbox"/> Social | 15. <input type="checkbox"/> Agricultural |
| 2. <input type="checkbox"/> Benevolent | 9. <input type="checkbox"/> Fraternal | 16. <input type="checkbox"/> Horticultural |
| 3. <input type="checkbox"/> Educational | 10. <input type="checkbox"/> Literary | 17. <input type="checkbox"/> Animal Husbandry |
| 4. <input type="checkbox"/> Civic | 11. <input type="checkbox"/> Cultural | 18. <input checked="" type="checkbox"/> Homeowners' Association |
| 5. <input type="checkbox"/> Patriotic | 12. <input type="checkbox"/> Athletic | 19. <input type="checkbox"/> Professional, commercial,
industrial, or trade association |
| 6. <input type="checkbox"/> Political | 13. <input type="checkbox"/> Science/Research | 20. <input type="checkbox"/> Other _____ |
| 7. <input type="checkbox"/> Religious | 14. <input type="checkbox"/> Hospital/Health Care | |



ACC USE ONLY	
Fee	\$ 10.00
Penalty	\$
Total	\$ 10.00

2. NUMBER OF EMPLOYEES: Please check one. (For statistical purposes only.)

25 or Less 26 - 100 101 - 500 Over 500

3. ~~---~~ If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below ~~---~~
~~---~~ and PRESIDENT or VICE PRESIDENT must sign page 4 of this report. ~~---~~

I, (individual) or We, (corporation) having been designated the new Statutory Agent, do hereby consent to this appointment until my removal or resignation pursuant to law.

F. M. CADDEN

Statutory Agent Name

7355 N. ORACLE Rd #110

Address

Signature

TUCSON, AZ 85704

City, State, Zip

4. Foreign Corporations list Address in Domicile Jurisdiction:

Street/P. O. Box

City, State, (Country) Zip

5. OFFICERS (If no changes since last report, check here ___ and go on to Section 6.)

PRESIDENT: PAUL BATES
~~PAUL BATES~~ VICE PRESIDENT: AMY MILLER

Address: 6168 VIA DEL PICHON Address: 6181 VIA DEL PICHON
TUCSON, AZ 85718- TUCSON, AZ 85718-

Date taking office: 02-24-94 Date taking office: 02-24-94

SECRETARY: DAVID MARTIN TREASURER: DAVID MARTIN

Address: 6171 VIA DE LA TORTOLA Address: 6171 VIA DE LA TORTOLA
TUCSON, AZ 85718- TUCSON, AZ 85718-

Date taking office: 02-24-94 Date taking office: 02-24-94

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

NAME: CHUCK BAREBO NAME: ED JENSEN

Address: 6243 VIA DE LA TORTOLA Address: 6159 VIA DE LA TORTOLA
TUCSON, AZ 85718- TUCSON, AZ 85718-

Date taking office: 02-24-94 Date taking office: 02-24-94

NAME: DAVID MARTIN NAME: _____

Address: 6171 VIA DE LA TORTOLA Address: _____
TUCSON, AZ 85718-

Date taking office: 02-24-94 Date taking office: _____



all attached

**STATE OF ARIZONA
CORPORATE COMMISSION**

NON-PROFIT CORPORATION ANNUAL REPORT

CORRECTIONS TO ANNUAL REPORT - OFFICERS AND DIRECTORS

President : Mr. Michael Crisp
6219 Via de la Tortola
Tucson, AZ 85718

Vice President: Ms. Florence Scarff
6218 Via de la Tortola
Tucson, AZ 85718

Treasurer & Secretary:
Mr. Drew Finley
6201 Via de la Tortola
Tucson, AZ 85718

Other Officers: Mr. James Sullivan
6080 Via del Tecaco
Tucson, AZ 85718

Ms. Eileen Willemssen
6120 Via del Tecaco
Tucson, AZ 85718

**ALL THE ABOVE OFFICERS AND DIRECTORS TOOK OFFICE ON
01/23/97**

BALANCE SHEET - consolidated ()
December, 1996

H:\PDS\ (2.102)
01/31/97
11:12 AM

PREPARED FOR :

PREPARED BY :

Cadden Parfrey Services
7355 N. Oracle, #110
Tucson, AZ 85704

ASSETS	
CASH	
B of A-Checking	26,383.37
B of A-Reserves	30,201.92

TOTAL CASH	56,585.29
TOTAL ASSETS	56,585.29
	=====
MEMBERS EQUITY	
Current Yr Excess/Deficit	12,585.23
Fund Balance	44,000.06

TOTAL MEMBERS EQUITY	56,585.29
TOTAL LIAB. & CAPITAL	56,585.29
	=====

8.A. CERTIFICATE OF DISCLOSURE (A.R.S. §10-1084)

Has any person serving either by election or appointment as officers, directors, trustees, or incorporators:

- 1. Been 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. Been 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. Been 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:
 - (a) involved the violation of fraud or registration provisions of the securities laws of that jurisdiction, or
 - (b) involved the violation of the consumer fraud laws of that jurisdiction, or
 - (c) involved the violation of the antitrust or restraint of trade laws of that jurisdiction?

YES _____ NO X

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). | |

8.B. STATEMENT OF BANKRUPTCY (A.R.S. §10-1083)

Are you currently in federal bankruptcy proceedings, and if so, under which chapter of federal bankruptcy law is the action filed and on what date?

Yes _____ Chapter _____ Date Filed _____ Case Number _____ No X

9. This report must be executed by the corporation and attested by its president, a vice-president, secretary, assistant secretary or treasurer. (If the corporation is in the hands of a receiver or trustee, it shall be executed on behalf of the corporation.)

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.

By Murphy Date 2/17/97 By [Signature] Date _____
 Title President Title Secretary