

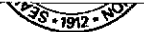


STATE OF ARIZONA
CORPORATION COMMISSION
CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE

Arizona Corporation Commission



00135064



DUE ON OR BEFORE 04/21/2000

FY99-00

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.

-0515014-6

1. CASAS PRESIDIO HOMEOWNERS ASSOCIATION, INC.
PO BOX 57610
TUCSON, AZ 85732-7610

RECEIVED

APR 17 2000

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

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

2. Arizona Statutory Agent: DORI J LOCKE
Street Address: 4803 E 5TH STREET #103
(NOT P.O. BOX) TUCSON AZ 85711-2112
City, State, Zip: ~~2-7610~~

Use this box only if appointing a new Statutory Agent

ACC USE ONLY	
Fee	\$ 10.00
Penalty	\$
Reinstate	\$
Expedite	\$
Resubmit	\$

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.

Dori Locke
Signature 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 | ☐ 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. Barbers/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 _____ |

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

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: LYLE MARCKS
Title: PRESIDENT/CEO

Title: _____

Address: 3093 N SPARKMAN BLVD
TUCSON, AZ 85716-

Date taking office: 01/01/1997

Name: RON GOSS
Title: SECRETARY

Title: _____

Address: 3083 N SPARKMAN BLVD
TUCSON, AZ 85716-

Date taking office: _____

Name: _____

Title: _____

Address: _____

Date taking office: _____

Name: JEFF YOCKEY
Title: TREASURER

Title: _____

Address: 3047 N SPARKMAN BLVD
TUCSON, AZ 85716-

Date taking office: 01/01/1997

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

Name: LYLE MARCKS

Address: 3093 N SPARKMAN BLVD

TUCSON, AZ 85716-

Date taking office: _____

Name: MARY JEAN KURKJIAN
Address: 4301 W PLANTATION

TUCSON, AZ 85716-

Date taking office: 01/01/1997

Name: JEFF YOCKEY

Address: 3047 N SPARKMAN BLVD

TUCSON, AZ 85716-

Date taking office: _____

Name: BILL HUNT
Address: 3075 N SPARKMAN BLVD

TUCSON, AZ 85718-

Date taking office: 01/01/1997

CASAS PRESIDIO

BOARD OF DIRECTORS - 2000

Lyle Marcks, President
3093 N. Sparkman Blvd
Tucson, AZ 85716 Elected 1999

Catherine Laughlin, Vice President
3061 N. Sparkman Blvd
Tucson AZ 85716 Elected 1999

Martha Vanzo, Secretary/Treasurer
~~3079 N. Sparkman Blvd~~
Tucson, AZ 85716 Elected 1999

Nelda McEnaney
3019 N. Sparkman Blvd
Tucson, AZ 85716 Elected 1999

Jeffrey Yockey
3047 N. Sparkman Blvd
Tucson, AZ 85716 Elected 1999

Sheila LeMaster
3059 N. Sparkman Blvd
Tucson, AZ 85716 Elected 1999

Balance Sheet (Cash)
CASAS PRESIDIO - (LCASASPR)
Dec 99

Page 1
1/20/00
02:29 PM

Prepared For:
CASAS PRESIDIO
FOR REPORTS ONLY
3000 N. SPARKMAN BLVD
TUCSON, AZ 85716

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

ASSETS

Cash

Cash-Checking

324.35

Total Cash

324.35

TOTAL ASSETS

324.35

LIABILITIES & CAPITAL

Capital

Prev yrs transfer to

30.00

Previous yrs interest

920.52

Interest Earned

47.66

Savings to checking (JE)

-9,637.75

Tran savings to checking

9,637.75

Tran checking

2,965.53

Checking to savings (JE)

-2,965.53

Bank Charges Saving Acct

23.00

Retained Earnings

-590.83

Total Equity

324.35

TOTAL LIAB. & CAPITAL

324.35

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 corporations are 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 & 10-11622.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 ☒

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 Lyle MARCKS Date 4/14/00 Name _____ Date _____

Signature Lyle March Signature _____

Title President Title _____

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