



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

Arizona Corporation Commission



00125179

DUE ON OR BEFORE 04/18/2000

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.**

RECEIVED

1. -0716187-9
SOUTHVIEW TRAILS COMMUNITY ASSOCIATION, INC.
% JUSTIN SCOTT
131 W NAVAJO STE D
PRESCOTT, AZ 86301

MAR 15 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: JUSTIN SCOTT
Street Address: 131 W NAVAJO STE D
(NOT P.O. BOX)
City, State, Zip: PRESCOTT AZ 86301-

Use this box only if appointing a new Statutory Agent

AGC USE ONLY

Fee \$ 10 PR

Penalty \$ 320.00

Restate \$ _____

Expense \$ _____

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.

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
 - ___ 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. 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)
N/A

Number of Shares/Certificates Issued Class Series Within Class (if any)
N/A

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: JIM CHAMBERLAIN
Title: PRESIDENT/CEO
Address: 505 S MADISON
TEMPE, AZ 85281-

Date taking office: 04/13/1994
Name: PATSY CHAMBERLAIN
Title: SECRETARY
Address: 505 S MADISON
TEMPE, AZ 85281-
Date taking office: 04/13/1994

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

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

Name: PATSY CHAMBERLAIN
Address: 505 S MADISON
TEMPE, AZ 85281-
Date taking office: 04/13/1994
Name: TY MYERS
Address: P O BOX 12127
PRESCOTT, AZ 86304-
Date taking office: 04/13/1994

Name: JIM CHAMBERLAIN
Address: 505 S MADISON
TEMPE, AZ 85281-
Date taking office: 04/13/1994
Name:
Address:
Date taking office:

Board of Directors List
 Southview Trails Community Assn.
 Page 1

Name / Address	Office / Phone #s	Term
Jerry Alvarez 1556 Southview Prescott, AZ. 86305	Ad Hoc Work Home 776-1093 Fax	10/05/99- / /
Jim Chamberlain 505 S. Madison Drive Tempe, AZ 86304	Work Home Fax	/ / - / /
John Cuccinello 1515 Southview Prescott, AZ. 86305	Ad Hoc Work Home 777-8115 Fax	10/05/99- / /
Felix Eierhoff 1488 Creekview Prescott, AZ. 86305	Ad Hoc Work Home 708-0350 Fax	10/05/99- / /
Jerry Gaughran 1533 Southview Prescott, AZ. 86305	Ad Hoc, Chairperson Work Home 541-7975 Fax	10/05/99- / /
Ty Myers P.O. Box 12127 Prescott, AZ 86304-2127	Work 776-1076 Home Fax 776-9057	/ / - / /
James Sigmon 1596 Southview Prescott, AZ. 86305	Ad Hoc Work Home 778-5798 Fax	10/05/99- / /

*** End of Report ***

Balance Sheet
 Southview Trails Community Assn.
 For Month Ending December 31, 1999

Run:Date 02/18/00
 Time 10:08 am
 Page 1

Assets

Current Assets

Cash		
Operating Checking	637.08	637.08

Total Current Assets		637.08

Total Assets		-----	637.08
		=====	

Liabilities and Member's Equity

Current Liabilities		
Prepaid Assessments		735.00

Total Current Liabilities		735.00

Member's Equity

Operating Fund		-97.92

Total Member's Equity		-97.92

Total Liabilities and Member's Equity		-----	637.08
		=====	

*** End of Report ***

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 Jim Chamberlain Date 3/9/00 Name _____ Date _____

Signature Jim Chamberlain Signature _____

Title President Title _____

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