



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

Arizona Corporation Commission



00330952

DUE ON OR BEFORE 04/12/2001

FY00-01

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.**

-0722030-0

1. BELLVUE HOMEOWNERS ASSOCIATION

% ~~STARPOINT MGMT SYSTEMS INC~~ Mutual Management Services
5510 N 44TH ST STE 1-200 PO Box 27008
PHOENIX, AZ 85018 Phoenix, Arizona 85061

JUL 2 - 2001

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

MISSING 2000 ANNUAL REPORT; CONTACT THE COMMISSION AT 542-32851

(filed recently)

Business Phone: 602 248 4466 (Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: ~~BOY BROWN~~ Zemp, Kapsal, Carpenter & Hazlewood, PLLC

Street Address: ~~5110 N 44TH ST STE 1-200~~

(NOT P.O. BOX) 7500 E. McDONALD DR. #100A

City, State, Zip: ~~PHOENIX~~ Scottsdale AZ ~~85018~~ AZ 85250

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ 10

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.

James K. Hazlewood, member
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.

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Number of Shares/Certificates Authorized

Class

Series Within Class (if any)

N/A

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.

Please Type or Print Clearly.

Name: _____ Name: _____

NONE ☒

Name: _____ Name: _____

7. OFFICERS Please Type or Print Clearly.Name: Michelle MayTitle: PresidentAddress: P.O. Box 27008Phoenix Arizona 85061Date taking office: 10/00Name: Mike MostTitle: SecretaryAddress: P.O. Box 27008Phoenix Arizona 85061Date taking office: 10/00Name: Mike DutyTitle: Vice PresidentAddress: P.O. Box 27008Phoenix, Arizona 85061Date taking office: 10/00Name: Shirley GillespieTitle: TreasurerAddress: P.O. Box 27008Phoenix Arizona 85061Date taking office: 10/00**8. DIRECTORS** Please Type or Print Clearly.Name: Michelle MayAddress: SameDate taking office: 10/90Name: Mike MostAddress: SameDate taking office: 10/00Name: Shirley GillespieAddress: SameDate taking office: 10/00Name: Mike DutyAddress: SameDate taking office: 10/00

BELLVUE HOA
December 2000

-0722030-0

	YTD 11/30/00	December	Budget December	Variance	YTD 12/31/00	Budget YTD	Variance YTD
INCOME							
Assessments	42,442.34	4,373.00	4,845.00	472.00	46,815.34	58,140.00	-11,324.66
Interest	470.73	0.00	58.33	58.33	470.73	699.96	-229.23
Late charges	12,465.30	30.00	0.00	-30.00	12,495.30	0.00	12,495.30
Collection	27.31				27.31		27.31
Fines	475.00				475.00		475.00
Misc	562.75	0.00	0.00	0.00	562.75	0.00	562.75
Total Income	56,443.43	4,403.00	4,903.33	500.33	60,846.43	58,839.96	2,006.47
EXPENSES							
UTILITIES							
401 Water	3,213.55	0.00	292.33	292.33	3,213.55	3,507.96	-294.41
403 Electric	259.28	0.00	29.33	29.33	259.28	351.96	-92.68
GROUND							
700 Lawn Contract	9,314.00	645.00	645.00	0.00	9,959.00	7,740.00	2,219.00
701 Lawn care supplies	1,304.91	72.00	135.16	63.16	1,376.91	1,621.92	-245.01
705 Trees/plants	1,624.52	0.00	84.66	84.66	1,624.52	1,015.92	608.60
709 Sprinklers	611.17	0.00	46.83	46.83	611.17	561.96	49.21
710 Plumbing	0.00	0.00	0.00	0.00	0.00	0.00	0.00
711 Electrical	1,749.12	352.60	429.33	76.73	2,101.72	5,151.96	-3,050.24
716 Walls & Fences	2,550.07	0.00	63.00	63.00	2,550.07	756.00	1,794.07
717 Signs	225.00	0.00	54.33	54.33	225.00	651.96	-426.96
718 Security	78.57	98.86	0.00	-98.86	177.43	0.00	177.43
BUILDINGS							
801 Painting	554.38	0.00	55.33	55.33	554.38	663.96	-109.58
806 General repairs	1,271.74	0.00	29.33	29.33	1,271.74	351.96	919.78
MISCELLANEOUS GENERAL & A							
901 Legal	22,281.41	0.00	50.00	50.00	22,281.41	600.00	21,681.41
902 Audit	1,790.00	0.00	66.67	66.67	1,790.00	800.04	989.96
903 Insurance	1,775.00	1,775.00	150.00	-1,625.00	3,550.00	1,800.00	1,750.00
904 Management fees	12,673.47	1,425.00	1,294.64	-130.36	14,098.47	15,535.68	-1,437.21
905 Permits & Licenses	0.00	0.00	13.00	13.00	0.00	156.00	-156.00
906 Income tax	175.00	0.00	46.00	46.00	175.00	552.00	-377.00
907 Other taxes	60.84	0.00	5.17	5.17	60.84	62.04	-1.20
908 Postage, copying, office supplies	1,403.24	370.43	304.33	-66.10	1,773.67	3,651.96	-1,878.29
910 Bank charges	217.18	0.00	5.42	5.42	217.18	65.04	152.14
911 Meetings, etc	311.44	39.37	104.67	65.30	350.81	1,256.04	-905.23
912 Misc. Admin.	184.00	0.00	13.33	13.33	184.00	159.96	24.04
914 Petty cash	0.00	0.00	0.00	0.00	0.00	0.00	0.00
915 Social Committee	1,850.05	0.00	250.00	250.00	1,850.05	3,000.00	-1,149.95
TOTAL GENERAL EXPENSES	65,477.94	4,778.26	4,167.86	-610.40	70,256.20	50,014.32	20,241.88
INCOME OVER(UNDER) EXPENS	-9,034.51	-375.26	735.47	1,110.73	-9,409.77	8,825.64	-18,235.41
GENERAL RESERVE			208.33	208.33	0.00	2,499.96	-2,499.96 -9,409.77

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)

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. 072 7030-0

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 ☒

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 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 Michelle May Date 6/28/01 Name _____ Date _____

Signature Michelle May Signature _____

Title President, Board of Directors Title _____

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