



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

Arizona Corporation Commission



00145227

DUE ON OR BEFORE 04/07/2000

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.**

-0733502-9

1. MCDOWELL MOUNTAIN RANCH COMMUNITY ASSOCIATION
PO BOX 25466
TEMPE, AZ 85285

RECEIVED

APR 24 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: MARK A VANDER STOEP
Street Address: 6303 S RURAL RD #7
(NOT P.O. BOX)
City, State, Zip: TEMPE AZ 85283-

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$10.00

Penalty \$

Renstate \$

Expedite \$

Resubmit \$

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 | ☐ 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: CURTIS SMITH
Title: PRESIDENT/CEO

Title: _____

Address: P O BOX 25466
TEMPE, AZ 85285-

Date taking office: 10/01/1994

Name: ALLEN HEYTENS
Title: SECRETARY

Title: _____

Address: P O BOX 25466
TEMPE, AZ 85285-

Date taking office: 09/01/1996

Name: MARK HAMMONS
Title: VICE-PRESIDENT

Title: _____

Address: P O BOX 25466
TEMPE, AZ 85285-

Date taking office: 10/01/1994

Name: ALLEN HEYTENS
Title: TREASURER

Title: _____

Address: P O BOX 25466
TEMPE, AZ 85285-

Date taking office: 09/01/1996

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

Name: CURTIS SMITH
Address: P O BOX 25466

Address: TEMPE, AZ 85285-

Date taking office: 10/01/1994

Name: MARK HAMMONS
Address: P O BOX 25466

Address: TEMPE, AZ 85285-

Date taking office: 10/01/1994

Name: ALLEN HEYTENS
Address: P O BOX 25466

Address: TEMPE, AZ 85285-

Date taking office: 09/01/1996

Name: _____
Address: _____

Address: _____

Date taking office: _____

MCDOWELL MOUNTAIN RANCH

OFFICERS:

ELECTED

CURTIS SMITH (P)

10/94

MARK HAMMONS (VP)

10/94

ALLEN HEYTENS (S/T)

09/96

All addresses are P.O. Box 25466, Tempe, AZ 85285

DIRECTORS:

CURTIS SMITH

10/94

MARK HAMMONS

10/94

ALLEN HEYTENS

09/96

All addresses are P.O. Box 25466, Tempe, AZ 85285

BALANCE SHEET

AS OF DEC 31, 1999

ASSETS

CURRENT ASSETS

CASH ON HAND	787.24
CASH IN BANK	98,209.37
RESERVE FUND / 38124236	63,535.78
CABLE USE FEE #3845 6652	126,129.90
RESERVE FUND (PRUDENTIAL SEC)	124,422.79

TOTAL CURRENT ASSETS	413,085.08
----------------------	------------

FIXED ASSETS

TOTAL ASSETS	413,085.08
--------------	------------

LIABILITIES & CAPITAL

CAPITAL

COMMUNITY CENTER DEPOSITS	175.00
DEVELOPER SUBSIDY/PRIOR YEARS	391,096.68
RETAINED EARNINGS	(176,234.92)
PROFIT/(LOSS) FOR PERIOD	198,048.32

TOTAL CAPITAL	413,085.08
---------------	------------

TOTAL LIABILITIES & CAPITAL	413,085.08
-----------------------------	------------

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 ALLEN P. HEYTENS Date 3-29-00 Name Mark Hammons Date _____

Signature [Signature] Signature [Signature]

Title SECRETARY Title Vice President

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