



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

Arizona Corporation Commission



**DUE ON OR BEFORE 04/19/2001**

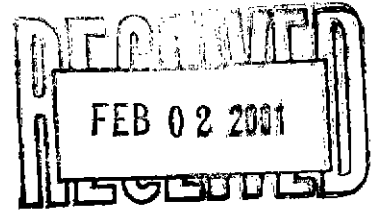
**FY00-01**

**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.**

**-0737961-4**

1. **CHAMPAGNE HOMEOWNERS ASSOCIATION, INC.**  
% **BETTY CARPENTER**  
**6720 CAMINO PRINCIPAL**  
**TUCSON, AZ 85715**



Business Phone: \_\_\_\_\_ (Business phone is optional.)  
State of Domicile: **ARIZONA** Type of Corporation: **NON-PROFIT**

**RECEIVED**

**MAR 13 2001**

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

2. Arizona Statutory Agent: **BETTY CARPENTER**  
Street Address: **6720 CAMINO PRINCIPAL**  
**(NOT P.O. BOX)**  
City, State, Zip: **TUCSON AZ 85715-**

*Use this box only if appointing a new Statutory Agent*

ACC USE ONLY	
Fee	\$ <u>103.00</u>
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.*

\_\_\_\_\_  
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.

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.

Please Type or Print Clearly.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

NONE

Name: \_\_\_\_\_ Name: \_\_\_\_\_

**7. OFFICERS** Please Type or Print Clearly. (SEE ATTACHED)

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_ Date taking office: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_ Date taking office: \_\_\_\_\_

**8. DIRECTORS** Please Type or Print Clearly.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_ Date taking office: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_ Date taking office: \_\_\_\_\_

07379614

CHAMPAGNE AT STARRPASS HOMEOWNERS ASSOCIATION  
BOARD OF DIRECTORS

- President: Maria Frisby, 3189 W. Champagne Dr., Tucson, AZ 85745
- Vice President: Marie Light, 116 N. Champagne Pl., Tucson, AZ 85745
- Secretary: Rosie Cuccio, 100 N. Players Club Dr., Tucson, AZ 85745
- Treasurer: Shirley Canatsey, 3185 W. Champagne Dr., Tucson, AZ 85745
- Board Member: Carol Cummings, 3193 W. Champagne Dr., Tucson, AZ 85745

All Board Members took office October 26, 2000

1. The first part of the document  
describes the general situation  
of the country and the  
state of the economy.

2. The second part of the document  
describes the general situation  
of the country and the  
state of the economy.

3. The third part of the document  
describes the general situation  
of the country and the  
state of the economy.

4. The fourth part of the document  
describes the general situation  
of the country and the  
state of the economy.

07379624

**Balance Sheet (Cash)**  
**3200 Champagne Drive MA1157 - (T3200)**  
**Dec 2000**

Page 1  
12/26/00  
10:43 AM

Prepared For:  
Champagne at Starpass  
3200 Champagne Drive  
Tucson, AZ 85745

Prepared By:  
The Property Mgmt. Group  
520-721-7121  
P.O. BOX 13402  
TUCSON, AZ 85732

**ASSETS**

Cash	
Cash in Bank-1	709.74
Cash in Bank-2	<u>16,460.05</u>
Total cash	17,169.79
Property	
Capital Improvement	<u>11,154.61</u>
Total Property	<u>11,154.61</u>
<b>TOTAL ASSETS</b>	<b>28,324.40</b>

**LIABILITIES & CAPITAL**

Tax Liabilities	
Workers Comp. Insurance	<u>182.00</u>
Total TAX liabilities	182.00
Total Liabilities	<u>182.00</u>

**CAPITAL**

Deposit to Reserves '93	-41,369.65
Retained Earnings	<u>-13,227.25</u>
Total Equity	<u>28,142.40</u>
<b>TOTAL LIAB. &amp; CAPITAL</b>	<b>28,324.40</b>

07379614

**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.

**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
- 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 Shirley Hall-Cantsey Date 3-7-01 Name Marie Frassky Date 3-7-01

Signature Shirley Hall-Cantsey Signature Marie Frassky

Title Treasurer Title President

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