



COPY

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

AZ Corp. Commission



00969479

DUE ON OR BEFORE 04/21/2004

FY03-04

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 on page 4 for proper format.

APR 26 2004

1. **-0744648-2**

**SUPERSTITION MOUNTAIN HOMEOWNERS ASSOCIATION
% CAPITAL CONSULTANTS -
MANAGEMENT CORP**

**ARIZONA CORP COMMISSION
CORPORATIONS DIVISION**

~~8360 E VIA DE VENTURA # L100
SCOTTSDALE, AZ 85258~~

**8360 E VIA DE VENTURA # L100
SCOTTSDALE AZ 85258**

Business Phone: _____ (Business phone is optional.)

State of Domicile: ARIZONA **Type of Corporation:** NON-PROFIT

2. **Statutory Agent: BART PARK III**
Mailing Address: 8360 E VIA DE VENTURA
STE L-100
City, State, Zip: SCOTTSDALE, AZ 85258

Physical Address, If Different:
Physical Address: 200 E Southern Ave
City, State, Zip: Apache Junction, AZ 85214

1087-8-04

ACC USE ONLY	
Fee \$	10
Penalty \$	_____
Reinstate \$	_____
Expedite \$	_____
Resubmit \$	_____

Use this box only if appointing a new Statutory Agent

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

Printed Name of new Statutory Agent

3. **Secondary Address:**

714001
810008
(Foreign Corporations are **REQUIRED** to complete this section).

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**ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION**

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

BUSINESS CORPORATIONS

NON-PROFIT 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 _____

- 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.) -0744648.2

Business trusts must indicate the number of transferable certificates held by trustees evidencing their beneficial interest in the trust estate. Please examine the corporation's original Articles of Incorporation for the amount of shares authorized. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of shares issued.

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 PLEASE TYPE OR PRINT CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: KAY Bendix

Title: President

Address: 200 E Southern Ave Apache Junction, AZ 85219

Date taking office: 1/28/04

Name: Pat Stenlicht

Title: Vice President

Address: 200 E Southern Ave Apache Junction AZ 85219

Date taking office: 1/28/04

Name: Susie Thruene

Title: Treasurer

Address: 200 E Southern Ave Apache Junction, AZ 85219

Date taking office: 1/28/04

Name:

Title:

Address:

Date taking office:

8. DIRECTORS PLEASE TYPE OR PRINT CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: KAY Bendix

Address: 200 E Southern Ave Apache Junction AZ 85219

Date taking office: 1/23/03

Name: Susie Thruene

Address: 200 E Southern Ave Apache Junction, AZ 85219

Date taking office: 1/28/04

Name: Judy Bernstein

Address: 200 E Southern Ave Apache Junction AZ 85219

Date taking office: 1/21/04

Name: Pat Stenlicht

Address: 200 E Southern Ave Apache Junction AZ 85219

Date taking office: 1/21/04

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BALANCE SHEET OPERATING
04/30/2004

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	CURRENT MONTH BALANCE	PREVIOUS MONTH BALANCE	NET CHANGE
ASSETS			
CASH			
CASH-OPERATING ACCT	52,324.76	51,019.11	1,305.65
CASH-OPERATING SAVINGS	64,229.94	64,169.95	59.99
PETTY CASH	300.00	300.00	0.00
	-----	-----	-----
TOTAL CASH	116,854.70	115,489.06	1,365.64
ACCOUNTS RECEIVABLE			
ACCOUNTS RECEIVABLE	1,095.00	1,385.00	(290.00)
	-----	-----	-----
TOTAL ACCOUNTS RECEIVABLE	1,095.00	1,385.00	(290.00)
OTHER ASSETS			
PREPAID INSURANCE	1,214.52	1,416.94	(202.42)
PREPAID EXPENSE	114.45	173.55	(59.10)
	-----	-----	-----
TOTAL OTHER ASSETS	1,328.97	1,590.49	(261.52)
TOTAL ASSETS	119,278.67	118,464.55	814.12
	=====	=====	=====

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231 SUPERSTITION MOUNTAIN RESORT
BALANCE SHEET OPERATING
04/30/2004

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	CURRENT MONTH BALANCE	PREVIOUS MONTH BALANCE	NET CHANGE
LIABILITIES & FUND BALANCE			
CURRENT LIABILITIES			
PAYROLL TAX-SOC SEC	(20.46)	0.00	(20.46)
PAYROLL TAX-MEDICARE	(4.78)	0.00	(4.78)
PAYROLL TAX-FEDERAL	(9.00)	0.00	(9.00)
PAYROLL TAX-STATE	99.52	192.72	(93.20)
ACCOUNTS PAYABLE	3,562.20	1,058.52	2,503.68
PREPAID ASSESSMENTS	18,150.00	19,110.00	(960.00)
COLLECTION FEES	50.00	140.00	(90.00)
	-----	-----	-----
TOTAL CURRENT LIABILITIES	21,827.48	20,501.24	1,326.24
TOTAL LIABILITIES	21,827.48	20,501.24	1,326.24
FUND BALANCE			
OWNERS EQUITY	102,727.69	102,727.69	0.00
CURRENT YEAR INCOME (LOSS)	(5,276.50)	(4,764.38)	(512.12)
	-----	-----	-----
TOTAL FUND BALANCE	97,451.19	97,963.31	(512.12)
TOTAL LIABILITIES & FUND BALANCE	=====	=====	=====

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231 SUPERSTITION MOUNTAIN RESORT
BALANCE SHEET - RESERVES
04/30/2004

	CURRENT MONTH BALANCE	PREVIOUS MONTH BALANCE	NET CHANGE
ASSETS			
CASH - RESERVE FUND			
CASH-RESERVES	240,028.60	238,583.45	1,445.15
CD - 100K - 11/07/04	106,626.81	106,626.81	0.00
CASH-RRCRF	4,456.34	4,110.06	346.28
	-----	-----	-----
TOTAL CASH - RESERVE FUND	351,111.75	349,320.32	1,791.43
TOTAL ASSETS	351,111.75	349,320.32	1,791.43
	=====	=====	=====
LIABILITIES & FUND BALANCE			
TOTAL LIABILITIES			
	0.00	0.00	0.00
FUND BALANCE			
RESERVE FUND EQUITY	337,143.94	337,143.94	0.00
NET INCOME (LOSS)	13,967.81	12,176.38	1,791.43
	-----	-----	-----
TOTAL FUND BALANCE	351,111.75	349,320.32	1,791.43
TOTAL LIABILITIES & FUND BALANCE	351,111.75	349,320.32	1,791.43
	=====	=====	=====

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

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Nonprofit corporations **must attach** a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.

9A. MEMBERS (A.R.S. § 10-11622.A.6)

Only Nonprofit Corporations must answer this question.

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/or 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 business 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, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.D.2, 10-1623 & 10-11623)

A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box **must** be marked: YES NO

B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR held or controlled over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?

[Underlined portion pertains to business corporations only] One box **must** be marked: YES NO

If "YES" to A and/or B, 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. (e.g. officer, director, trustee or major stockholder)
2. The state in which each corporation was a) incorporated b) transacted business.
3. The dates of corporate operation.
4. If any involved person (listed in #1) has been involved in any other bankruptcy proceeding within the past year, the name and address of each corporation.
5. Date, Case number and Court where the bankruptcy was filed or receiver appointed.
6. Name and address of court appointed receiver.

12. SIGNATURES: Annual Reports must be signed and dated by at least one duly authorized officer or they 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 Kay Bendix Date 4/8/04 Name SUSAN THURNE Date 4/9/04
 Signature Kay Bendix Signature Susan Thurne
 Title President Title TREASURER

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