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

Arizona Corporation Commission

00299280

DUE ON OR BEFORE 04/21/2001 **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.

-0769987-4

1. PINNACLE CANYON LAS VENTANAS AT TROON NO
14614 N KIERLAND BLVD #190
SCOTTSDALE, AZ 85254-2719

RECEIVED

APR 24 2001

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: 480 905-2475 (Business phone is optional.)
State of Domicile: **ARIZONA** Type of Corporation: **NON-PROFIT**

2. Arizona Statutory Agent: **PHILIP C BENSON**
Street Address: **14614 N KIERLAND BLVD**
(NOT P.O. BOX)
City, State, Zip: **SCOTTSDALE** **AZ 85254-2719**

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

229210

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

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. X 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. 07699874

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.

NONE ☐

Name: _____ **Name:** _____

Name: _____ **Name:** _____

7. OFFICERS Please Type or Print Clearly.

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: _____

07699874

PINNACLE CANYON LAS VENTANAS HOMEOWNERS ASSOCIATION

OFFICERS:	**ELECTED:**
ROGER WILLIAMS (P)	2/96
PHILIP BENSON (VP)	2/96
LIZ SOLOMON (S/T)	2/01

All addresses are P.O. Box 25466, Tempe, AZ 85285-5466

DIRECTORS:	**ELECTED:**
ROGER WILLAMS	2/96
PHILIP BENSON	2/96
LIZ SOLOMON	2/01

All addresses are P.O. Box 25466, Tempe, AZ 85285-5466

0769874

PINNACLE CANYON LAS VENTANAS H
Balance Sheet
Dec 31, 2000
DEC 1, 2000 - DEC 31, 2000

ASSETS	
CURRENT ASSETS	
OPERATING ACCOUNT #0417 1587	24,693.07
RESERVE ACCOUNT # 3793 4333	52,359.67
DEPOSITS REFUNDABLE	.00
TOTAL CURRENT ASSETS	77,052.74
TOTAL ASSETS	77,052.74

LIABILITIES & CAPITAL	
CAPITAL	
SUBSIDY/PRIOR YEAR	29,553.00
SUBSIDY/YTD THRU PRIOR MONTH	.00
SUBSIDY / CURRENT YEAR	.00
RETAINED EARNINGS	18,990.92
PROFIT /(LOSS) FOR PERIOD	28,508.82
TOTAL CAPITAL	77,052.74
TOTAL LIABILITIES & CAPITAL	77,052.74

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.
2. Full birth name.
3. Present home address.
4. Prior addresses (for immediate preceding 7 year period).
5. Date and location of birth.
6. Social Security Number
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.

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 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 Liz Solomon **Date** 4/20/01 **Name** Philip J. Benson **Date** 4/20/01

Signature Liz Solomon **Signature** Philip J. Benson

Title Secretary/Treasurer **Title** Vice President

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

Annual Report Instruction Sheet - READ ME!

This instruction sheet contains information about the annual reporting process for corporations doing business in Arizona. Every corporation in Arizona must submit an Annual Report to the Corporations Division of the Arizona Corporation Commission once a year. This is the only notice and form you will receive. Corporations must use this Annual Report Form prescribed and furnished by the Arizona Corporation Commission. **No other form or format is allowed.** The Commission's computerized imaging system cannot work with other forms or formats. **IMPORTANT**: This Annual Report must be correctly filled out and submitted by the assigned due date or the corporation may have its authority and operating status revoked by the State of Arizona. According to A.R.S. §10-1622.F., penalties accrue on business corporation annual reports which are submitted late (after the due date). Use the check off boxes on this sheet as you complete the form.

The Corporation Commission has completed the form with information we have available regarding the corporation. Please verify each line. Strike out incorrect information by drawing a line through the incorrect data. Correct information should be legibly written above or to the side of the struck, incorrect information. The entirety of this document is public record, including addresses cited.

- ❒ **Section 1.** All corporations must state their name, address, zip code, domicile state, and type (e.g., nonprofit, business, sole, professional, business trust). Please list a business phone number.
- ❒ **Section 2.** All corporations must state the name and address of the current Statutory Agent for the corporation. Correct information about the Statutory Agent is vital to the legitimate authority and status of the corporation. The Statutory Agent **must not** use a P.O. Box. New Statutory Agents must consent to their appointment by signing the appropriate line. A corporation must amend their records at the Commission anytime the Statutory Agent is changed or whenever the Agent's designated mailing address changes.
- ❒ **Section 3.** Foreign (out-of-state/country) corporations must state their known place of business in this state and in the jurisdiction in which they are incorporated. List the primary address in Section 1, and the secondary address in Section 3.
- ❒ **Section 4.** All corporations must check the category that best describes the character of their corporation in the applicable business or nonprofit corporation area.
- ❒ **Section 5.** All business corporations must indicate the number of shares which they have authorized, the class and series. All business trusts must indicate the number of transferable certificates held by trustees.
- ❒ **Section 6.** All business corporations must indicate the list of applicable shareholders.
- ❒ **Section 7.** Please list all principal officers. All corporations must have at least **one** duly authorized officer, with address.
- ❒ **Section 8.** Please list all directors. All corporations must have at least **one** director per A.R.S. §§10-803.A & 10-3803.A.
- ❒ **Section 9.** **All Nonprofit corporations** must file a financial disclosure statement. Nonprofit corporations meet their obligation by **attaching** one of the following documents: 1) Their most recent copy of Page 2, Form 99 filed with the Arizona Department of Revenue; OR 2) A copy of the corporation's Charitable Organization Financial Statement as filed with the Arizona Secretary of State pursuant to A.R.S. §44-6552; OR 3) A copy of the corporation's Treasurer's Report/Financial Statement prepared for the current fiscal year; OR 4) A copy of the financial statement prepared for the corporation's members; OR 5) A statement that the corporation conducted no business in Arizona in the past year. All other forms of corporations are exempt from filing a financial disclosure. **All Nonprofit Corporations** must also indicate whether or not the corporation has members.
- ❒ **Section 10.** All corporations must check either YES or NO in the Certificate of Disclosure. Those who check the "YES" box must supply the attachment required and explained in section 10.
- ❒ **Section 11.** All corporations must check either YES or NO in the Statement of Bankruptcy. Those who check the "YES" box must supply the attachment required and explained in section 11.
- ❒ **Section 12.** All corporations must read the declarations in this section. If they have complied, and if they have completed the Annual Report, then the applicable officer(s) listed in section 7 must acknowledge by signing the report. The signer(s) shall be at least one duly authorized officer.
- ❒ **Sign & Mail the Check and Annual Report.** Business corporations must send **$45**, Nonprofit corporations **$10**. Profit corporations are subject to penalties if their report is submitted after its assigned due date. Contact the Annual Report section at **602-542-3285 (Phoenix) or 520-628-6560 (Tucson)** or by FAX at **602-542-0082** for the penalty amount due.

MAKE CHECK PAYABLE TO:	ARIZONA CORPORATION COMMISSION		
MAIL OR DELIVER TO:	c/o Annual Reports - Corporations Division		
	1300 West Washington	or	400 West Congress
	Phoenix, AZ 85007-2929		Tucson, AZ 85701-1347

Seek professional advice from your accountant, attorney, or other knowledgeable source if you need help with any section. The Commission's web site (www.cc.state.az.us) has more general information about annual reports and reporting requirements. The Annual Reports Section of the Corporations Division cannot give legal or tax advice, but you may call them with your other questions regarding this form at (602) 542-3285.