



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

AZ Corp. Commission 01004435

DUE ON OR BEFORE 04/18/2004

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.

RECEIVED

SEP 22 2004

ARIZONA CORP. COMMISSION CORPORATIONS DIVISION

1. -0792365-0 PINNACLE CANYON HOMEOWNERS' ASSOCIATION 8711 E PINNACLE PEAK RD SCOTTSDALE, AZ 85255

Business Phone: (Business phone is optional.)

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

2. Statutory Agent: ERIC J GERSTER Mailing Address: 8711 E PINNACLE PEAK RD STE D-100 City, State, Zip: SCOTTSDALE, AZ 85255

Physical Address, If Different. Physical Address: City, State, Zip:

ACC USE ONLY Fee \$ 10 Penalty \$ Reinstatement \$ 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: 848133

(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. 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. Please Print or Type Clearly.

Number of Shares/Certificates Authorized Class Series Within Class (if any)
NA

Number of Shares/Certificates Issued Class Series Within Class (if any)
NA

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 [X] Name: Name:

7. OFFICERS Please Type or Print Clearly. You Must List at Least One.

Name: JERRY NELSON
Title: PRESIDENT
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

Name: THOMAS NELSON
Title: VICE PRESIDENT
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

Name: ERIC GERSTER
Title: SECRETARY
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

Name: ERIC GERSTER
Title: TREASURER
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

8. DIRECTORS Please Type or Print Clearly. You Must List at Least One.

Name: JERRY NELSON
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

Name: THOMAS NELSON
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

Name: ERIC GERSTER
Address: 8711 E PINNACLE PEAK RD
SCOTTSDALE AZ 85255
Date taking office: 11-18-96

Name:
Address:
Date taking office:

PINNACLE CANYON HOMEOWNERS' ASSOCIATION
BALANCE SHEET
December 31, 2003

	<u>Operating Fund</u>	<u>Replacement Fund</u>	<u>Total</u>
ASSETS			
Cash, including interest-bearing deposits	\$ 129,246	\$ 128,115	\$ 257,361
Assessment receivable	3,851	-	3,851
Prepaid expenses	773	-	773
	<u> </u>	<u> </u>	<u> </u>
TOTAL ASSETS	\$ 133,870	\$ 128,115	\$ 261,985
 LIABILITIES AND FUND BALANCES			
Accounts payable	\$ 7,944	\$ -	\$ 7,944
Customer deposits	990	-	990
Income taxes payable	4	-	4
	<u> </u>	<u> </u>	<u> </u>
TOTAL LIABILITIES	8,938	-	8,938
 Fund Balances	 <u>124,932</u>	 <u>128,115</u>	 <u>253,047</u>
TOTAL LIABILITIES AND FUND BALANCES	\$ 133,870	\$ 128,115	\$ 261,985

The accompanying notes are an integral part of these financial statements.

PINNACLE CANYON HOMEOWNERS' ASSOCIATION
 STATEMENT OF REVENUES, EXPENSES, AND
 CHANGES IN FUND BALANCES
 Year Ended December 31, 2003

	<u>Operating Fund</u>	<u>Replacement Fund</u>	<u>Total</u>
REVENUES			
Regular assessments	\$ 114,818	\$ 30,300	\$ 145,118
Transfer/disclosure fees	1,500		1,500
Interest Income	1,502	1,237	2,739
	<u>117,820</u>	<u>31,537</u>	<u>149,357</u>
EXPENSES			
Accounting	2,000	-	2,000
Electricity	4,663	-	4,663
Ground and erosion control	10,879	-	10,879
Insurance	2,663	-	2,663
Street cleaning	1,378	-	1,378
Landscape maintenance	20,271	-	20,271
Management fees	16,860	-	16,860
Postage and office	762	-	762
Repairs and replacements	15,091	-	15,091
Reproduction	319	-	319
Security	5,874	-	5,874
Professional Fees	831	-	831
Water and sewer	844	-	844
Income tax expense	142	-	142
Telephone	886	-	886
Transfer/Disclosure expense	2,306	-	2,306
	<u>85,769</u>	<u>-</u>	<u>85,769</u>
EXCESS OF REVENUES OVER EXPENSES	32,051	31,537	63,588
BEGINNING FUND BALANCES	<u>92,881</u>	<u>96,578</u>	<u>189,459</u>
ENDING FUND BALANCES	<u>\$ 124,932</u>	<u>\$ 128,115</u>	<u>\$ 253,047</u>

The accompanying notes are an integral part of these financial statements

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

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?

One box **must** be marked:

YES **NO**

[Underlined portion pertains to business corporations only]

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 ERIC GERSTER Date 6-17-04 Name _____ Date _____

Signature [Signature] Signature _____

Title SECRETARY TREASURER Title _____

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