



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

Arizona Corporation Commission



00273960

DUE ON OR BEFORE 04/24/2001

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.**

-0822027-0

RECEIVED

1. **FLETCHER HEIGHTS COMMUNITY ASSOCIATION**
9140 S KYRENE #202
TEMPE, AZ 85284

MAR 07 2001

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**
Street Address: **6303 S RURAL #7**
(NOT P.O. BOX)
City, State, Zip: **TEMPE AZ 85283-**

Use this box only if appointing a new Statutory Agent

ACC USE ONLY	3/9/01
Fee	\$10
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:
206 978

(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 | NON-PROFIT CORPORATIONS |
|--|---|
| <input type="checkbox"/> 1. Accounting | <input type="checkbox"/> 1. Charitable |
| <input type="checkbox"/> 2. Advertising | <input type="checkbox"/> 2. Benevolent |
| <input type="checkbox"/> 3. Aerospace | <input type="checkbox"/> 3. Educational |
| <input type="checkbox"/> 4. Agriculture | <input type="checkbox"/> 4. Civic |
| <input type="checkbox"/> 5. Architecture | <input type="checkbox"/> 5. Political |
| <input type="checkbox"/> 6. Banking/Finance | <input type="checkbox"/> 6. Religious |
| <input type="checkbox"/> 7. Barbers/Cosmetology | <input type="checkbox"/> 7. Social |
| <input type="checkbox"/> 8. Construction | <input type="checkbox"/> 8. Literary |
| <input type="checkbox"/> 9. Contractor | <input type="checkbox"/> 9. Cultural |
| <input type="checkbox"/> 10. Credit/Collection | <input type="checkbox"/> 10. Athletic |
| <input type="checkbox"/> 11. Education | <input type="checkbox"/> 11. Science/Research |
| <input type="checkbox"/> 12. Engineering | <input type="checkbox"/> 12. Hospital/Health Care |
| <input type="checkbox"/> 13. Entertainment | <input type="checkbox"/> 13. Agricultural |
| <input type="checkbox"/> 14. General Consulting | <input type="checkbox"/> 14. Animal Husbandry |
| <input type="checkbox"/> 15. Health Care | <input checked="" type="checkbox"/> 15. Homeowner's Association |
| <input type="checkbox"/> 16. Hotel/Motel | <input type="checkbox"/> 16. Professional, commercial industrial or trade association |
| <input type="checkbox"/> 17. Import/Export | <input type="checkbox"/> 17. Other _____ |
| <input type="checkbox"/> 18. Insurance | |
| <input type="checkbox"/> 19. Legal Services | |
| <input type="checkbox"/> 20. Manufacturing | |
| <input type="checkbox"/> 21. Mining | |
| <input type="checkbox"/> 22. News Media | |
| <input type="checkbox"/> 23. Pharmaceutical | |
| <input type="checkbox"/> 24. Publishing/Printing | |
| <input type="checkbox"/> 25. Ranching/Livestock | |
| <input type="checkbox"/> 26. Real Estate | |
| <input type="checkbox"/> 27. Restaurant/Bar | |
| <input type="checkbox"/> 28. Retail Sales | |
| <input type="checkbox"/> 29. Science/Research | |
| <input type="checkbox"/> 30. Sports/Sporting Events | |
| <input type="checkbox"/> 31. Technology(Computers) | |
| <input type="checkbox"/> 32. Technology(General) | |
| <input type="checkbox"/> 33. Television/Radio | |
| <input type="checkbox"/> 34. Tourism/Convention Services | |
| <input type="checkbox"/> 35. Transportation | |
| <input type="checkbox"/> 36. Utilities | |
| <input type="checkbox"/> 37. Veterinary Medicine/Animal Care | |
| <input type="checkbox"/> 38. 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.

-0822027-0

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.

Name: Norman Nicholls

Title: President

Address: P.O. Box 25466

Tempe, Az 85285

Date taking office: 5-28-97

Name: Douglas S Fulton

Title: Secretary / Treasurer

Address: P.O. Box 25466

Tempe, Az 85285

Date taking office: 5-28-97

Name: Ira Fulton

Title: Vice President

Address: P.O. Box 25466

Tempe, Az 85285

Date taking office: 5-28-97

Name: _____

Title: _____

Address: _____

Date taking office: _____

8. DIRECTORS Please Type or Print Clearly.

Name: Norman Nicholls

Address: PO Box 25466

Tempe, Az 85285

Date taking office: 5-28-97

Name: Douglas S Fulton

Address: P.O. Box 25466

Tempe, Az 85285

Date taking office: 5-28-97

Name: Ira Fulton

Address: P.O. Box 25466

Tempe, Az 85285

Date taking office: 5-28-97

Name: _____

Address: _____

Date taking office: _____

2/3/01
10:40 AM

FLETCHER HEIGHTS
Balance Sheet
Dec 31, 2000
DEC 1, 2000 - DEC 31, 2000

ASSETS

CURRENT ASSETS

CASH IN BANK ACCT #0177 1181	7,624.21
RESERVE ACCOUNT #4493 8201	49,015.26
CD/12 MONTHS #81924124	25,000.00
DEPOSITS REFUNDABLE	250.00

TOTAL CURRENT ASSETS	<u>81,889.47</u>
----------------------	------------------

TOTAL ASSETS	<u><u>81,889.47</u></u>
--------------	-------------------------

LIABILITIES & CAPITAL

CAPITAL

RETAINED EARNINGS	74,251.39
PROFIT /(LOSS) FOR PERIOD	7,638.08

TOTAL CAPITAL	<u>81,889.47</u>
---------------	------------------

TOTAL LIABILITIES & CAPITAL	<u><u>81,889.47</u></u>
-----------------------------	-------------------------

FLETCHER HEIGHTS
Income Statement
Dec 31, 2000

DESCRIPTION	ACTUAL	CURRENT PERIOD BUDGET	VARIANCE	YEAR ACTUAL	TO BUDGET	DATE VARIANCE
INCOME						
OPERATING INCOME						
RESIDENTIAL ASSESSMENT	35,682.57	30,468.00	5,214.57	338,078.52	319,548.00	18,530.52
DELINQUENT RESIDENTIAL	1,619.95	.00	1,619.95	17,598.00	.00	17,598.00
GREYSTONE ASSESSMENTS	.00	.00	.00	549.87	837.00	287.13-
MORRISON ASSESSMENTS	.00	.00	.00	128.43	87.00	41.43
WORKING CAPITAL	942.30	3,828.00	2,885.70-	32,932.20	45,936.00	13,003.80-
TOTAL OPERATING INCOME	38,244.82	34,296.00	3,948.82	389,287.02	366,408.00	22,879.02
OPERATING TRANSFER TO	2,871.00-	2,871.00-	.00	28,710.00-	34,452.00-	5,742.00
TOTAL INCOME	35,373.82	31,425.00	3,948.82	360,577.02	331,956.00	28,621.02
EXPENSES						
OPERATING EXPENSES						
MAINTENANCE & REPAIR						
LANDSCAPE MAINTENANCE	16,000.00	16,000.00	.00	190,797.00	186,000.00	4,797.00
PEST CONTROL	74.00	100.00	26.00-	467.00	1,200.00	733.00-
ELECTRICAL & LIGHTING	164.87	125.00	39.87	2,156.85	1,500.00	656.85
WATERFALL MAINTENANCE	840.00	850.00	10.00-	10,251.00	10,200.00	51.00
MONUMENT REPAIR	.00	75.00	75.00-	4,315.82	900.00	3,415.82
SPRINKLER REPAIR	.00	300.00	300.00-	4,515.71	3,600.00	915.71
TREE TRIMMING	.00	.00	.00	1,734.00	1,800.00	66.00-
CONTRACT SERVICE	.00	500.00	500.00-	17,608.79	6,000.00	11,608.79
GRAFITTI REMOVAL	.00	100.00	100.00-	646.81	1,200.00	553.19-
TOTAL MAINT. & REPAIR	17,078.87	18,050.00	971.13-	232,492.98	212,400.00	20,092.98
PARTS & SUPPLIES						
LIGHT BULBS	164.87-	20.00	184.87-	305.49	240.00	65.49
SPRINKLER PARTS	516.29	300.00	216.29	2,976.32	3,600.00	623.68-
LANDSCAPE SUPPLIES	.00	300.00	300.00-	91.61	3,600.00	3,508.39-
WATER FEATURE PARTS	256.70	200.00	56.70	1,449.36	2,400.00	950.64-
WATER FEATURE CHEMICAL	206.21	1,000.00	793.79-	461.83	12,000.00	11,538.17-
FERTILIZER	.00	.00	.00	127.25	5,550.00	5,422.75-
PLANTS, BUSHES, & TREES	.00	475.00	475.00-	6,534.22	5,700.00	834.22
SEED/SCALP	.00	.00	.00	13,533.20	15,000.00	1,466.80-
MISC PARTS/SUPPLIES	.00	100.00	100.00-	.00	1,200.00	1,200.00-
TOTAL PARTS & SUPPLIES	814.33	2,395.00	1,580.67-	25,479.28	49,290.00	23,810.72-
UTILITIES						
ELECTRIC	695.11	2,400.00	1,704.89-	21,514.96	28,800.00	7,285.04-
WATER	1,997.50	2,600.00	602.50-	39,422.26	39,700.00	277.74-
TOTAL UTILITIES	2,692.61	5,000.00	2,307.39-	60,937.22	68,500.00	7,562.78-

FLETCHER HEIGHTS
Income Statement
Dec 31, 2000

DESCRIPTION	ACTUAL	CURRENT PERIOD BUDGET	PERIOD VARIANCE	YEAR ACTUAL	TO BUDGET	DATE VARIANCE
ADMINISTRATIVE						
LEGAL & ACCOUNTING	394.33	275.00	119.33	4,372.10	3,300.00	1,072.10
COLLECTION COSTS	1,656.00	100.00	1,556.00	10,503.00	1,200.00	9,303.00
BANK SERVICE CHARGE	25.00	.00	25.00	125.00	.00	125.00
INSURANCE	.00	.00	.00	5,547.00	2,800.00	2,747.00
MANAGEMENT FEES	3,638.25	3,274.00	364.25	36,284.75	34,668.00	1,616.75
POSTAGE	.00	275.00	275.00-	620.11	3,300.00	2,679.89-
COMMUNITY MAILINGS	287.50	325.00	37.50-	2,888.77	3,900.00	1,011.23-
COUPONS	2,331.30	.00	2,331.30	2,331.30	2,625.00	293.70-
NEWSLETTERS	963.75	.00	963.75	963.75	2,400.00	1,436.25-
PROPERTY TAX	.00	.00	.00	301.54	250.00	51.54
INCOME TAX	.00	.00	.00	235.00	260.00	25.00-
TOTAL ADMINISTRATIVE	9,296.13	4,249.00	5,047.13	64,172.32	54,703.00	9,469.32
TOTAL OPERATING EXPENS	29,881.94	29,694.00	187.94	383,081.80	384,893.00	1,811.20-
NET OPERATING PROFILE/L	5,491.88	1,731.00	3,760.88	22,504.78-	52,937.00-	30,432.22
RESERVE INCOME & EXPENSE						
RESERVE INTEREST INCOM	134.50	.00	134.50	1,432.86	.00	1,432.86
RESERVE INCOME FROM OP	2,871.00	3,350.00	479.00-	28,710.00	36,368.00	7,658.00-
TOTAL RESERVE & EXPENS	3,005.50	3,350.00	344.50-	30,142.86	36,368.00	6,225.14-
NET PROFIT / (LOSS)	8,497.38	5,081.00	3,416.38	7,638.08	16,569.00-	24,207.08

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 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 <u>Norm Lee Nichols (115)</u>	Date <u>2-26-01</u>	Name _____	Date _____
Signature <u>[Signature]</u>	Signature _____	Signature _____	Signature _____
Title <u>President</u>	Title _____	Title _____	Title _____

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