



WEB FORM COPY

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

DUE ON OR BEFORE 06/04/2004

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.

1. -0831274-3

WILL ROGERS EQUESTRIAN RANCH COMMUNITY ASSOCIATION
20485 E COLT DR TRI-CITY PROPERTY MGMT
QUEEN CREEK, AZ 85242 760 S STAPLEY DR #3
MESA AZ 85204-3400

RECEIVED MAY 20 2004

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

RECEIVED

JUL 15 2004

ARIZONA CORP COMMISSION CORPORATIONS DIVISION

Business Phone: (Business phone is optional)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2.

Statutory Agent: Phyllis Carpenter Physical Address, If Different.
Mailing Address: 760 S STAPLEY DR #3 Physical Address:
City, State, Zip: MESA AZ 85204-3400 City, State, Zip:

NO \$ 7/19/04
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: Phyllis Carpenter

Printed Name of new Statutory Agent: PHYLLIS CARPENTER

3. Secondary Address: 81590

(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/Coiffage
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(Computer)
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)
N/A		

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

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 PRINT OR TYPE CLEARLY.

NONE

Name: _____ Name: _____
 Name: _____ Name: _____

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

Name: _____	Name: <u>SEE ATTACHED SCHEDULE</u>
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 PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: _____	Name: <u>SEE ATTACHED SCHEDULE</u>
Address: _____	Address: _____
Date taking office: _____	Date taking office: _____
Name: _____	Name: _____
Address: _____	Address: _____
Date taking office: _____	Date taking office: _____

Will Rogers Equestrian Ranch
Community Association
Board of Directors
Date Elected – November 2003

Name and Title:

Address:

President

Richard Vest

*

Vice President

Robbie ~~Snyder~~ Snyder

*

Secretary

Ron McCoy

*

Treasurer

Grant Tayrien

*

Director

Harriet

Georgorpadakos

*

* % Tri-City Property Management, Inc.
760 S. Stapley Dr., Ste. 3
Mesa, Arizona 85204-3400

BALANCE SHEET
(Cash Basis)

ASSETS

Current Assets:

Cash	<u>\$24,752</u>
Trade notes and accounts receivable (less allowance for bad debts)	<u> </u>
Inventories	<u> </u>
Other current assets	<u> </u>
Total Current Assets	<u>\$24,752</u>

Land, buildings and other fixed assets
(net of accumulated depreciation)

Other long-term assets

Total Assets **\$24,752**

LIABILITIES

Current Liabilities:

Accounts Payable	<u>\$0</u>
Mortgage, notes bonds (payable in less than 1 year)	<u> </u>
Other current liabilities	<u> </u>
Total Current Liabilities	<u>\$0</u>

Mortgage, notes bonds (payable in more than 1 year)

Fund Balances:

Restricted	<u> </u>
Unrestricted	<u>\$24,752</u>
Total Fund Balances	<u>24,752</u>

Total Liabilities and Fund Balances **\$24,752**

Unaudited - see Accountants' Compilation Report.

C & J Raymond, CPAs, LLP

Clyde H. Raymond, CPA

Joann Raymond, CPA

Members of AMERICAN INSTITUTE OF CPAs (AICPA)

Member of COMMUNITY ASSOCIATIONS INSTITUTE (CAI)

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Web: www.raymondcpa.com

March 24, 2004

Arizona Corporation Commission

Re: Annual report of Will Rogers Equestrian Ranch
Community Association ✓
As of December 31, 2003

We have compiled the statement of financial condition - balance sheet (Section 9) on the cash basis of the above named corporation for the date indicated above and included in the accompanying prescribed form, in accordance with the Statements of Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

Our compilation was limited to presenting in the form prescribed by the Arizona Corporation Commission information that is representation of management. We have not audited or reviewed the financial statement referred to above and, accordingly, do not express an opinion or any other form of assurance.

This financial statement is presented in accordance with the requirements of the Arizona Corporation Commission, which differs from generally accepted accounting principles. Accordingly, this financial statement is not designed for those who are not informed about such differences.

C & J Raymond, CPAs, LLP

Certified Public Accountants

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?

[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.

Print Name Robbie Snyder Date 5/18/04 Name _____ Date _____

Signature [Handwritten Signature] Signature _____

Title President of HOA Title _____

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