WEB FORM COPY

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

AZ Corp. Commission
02058761

DUE ON OR BEFORE 04/03/2007 FY06-07 **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
MAR - 5 2007
JOHN OSSELAER
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

1. -0868108-0
LARKSPUR GARDENS CONDOMINIUM ASSOCIATION OF PHOENIX
~~% FARRMONT REALTY SERVICES~~ ~~OSSELAER COMPANIES~~
~~320 E MCDOWELL RD #200~~ 532 E. MARYLAND AVE - SUITE F
PHOENIX, AZ 85004 ~~PHOENIX~~, AZ 85012

* DELINQUENT ANNUAL REPORT 12/11/2006; CONTACT THE COMMISSION AT 602-542-3285!

Business Phone: 602-277-4418 (Business phone is optional.)

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

~~Osselaer Co.~~ JOHN OSSELAER

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2. **Statutory Agent:** ~~JONATHAN OLCOTT~~
Mailing Address: ~~190 W MAGEE #164~~
City, State, Zip: ~~ORO VALLEY, AZ 85704~~
532 E. Maryland Ave. #F
Phx, Az 85012

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

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 the appointment until my removal or resignation pursuant to law.

[redacted]
Signature of new Statutory Agent

John Osselaer
Printed Name of new Statutory Agent

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

3. **Secondary Address:**

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

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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 PRINT OR TYPE CLEARLY.

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5a. Please examine the corporation's original Articles of Incorporation for the amount of **shares authorized.**

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

5b. 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 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:** _____

Title: _____ **Title:** _____

Address: See attached **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:** _____

Address: _____ **Address:** _____

_____ _____

Date taking office: _____ **Date taking office:** _____

Name: _____ **Name:** _____

Address: _____ **Address:** _____

_____ _____

Date taking office: _____ **Date taking office:** _____

BOARD OF DIRECTORS
2005/2006

PRESIDENT	Angela Sperekas 12445 N. 21st Avenue, #6 Phoenix, AZ 85029		
VICE-PRESIDENT	Peggy Goodman 12445 N. 21st Avenue, #10 Phoenix, AZ 85029		
DIRECTOR	Moved May 2006 Steve Leon 12445 N. 21st Avenue, #32 Phoenix, AZ 85029		

Jan 2006 - Dec 2006

CASH	
OPERATING FUND	6,030.41
RESERVE - SAVINGS ACCT	6,464.53
TOTAL CASH	12,494.94
FIXED ASSETS	
TOTAL ASSETS	12,494.94
LIABILITIES & CAPITAL	
CAPITAL	
RESERVE EQUITY	6,464.53
EQUITY/FUND BALANCE	3,279.12
NET INCOME/(LOSS)	2,751.29
TOTAL CAPITAL	12,494.94
TOTAL LIAB. & CAPITAL	12,494.94

9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9) 0868108-0

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.
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, 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 other 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 [redacted] Date 1-25-07 Name _____ Date _____

Signature [redacted] Signature _____

Title Board Member Title _____

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