



RECEIVED

MAR 16 2016

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

**CORPORATION STATEMENT OF CHANGE  
OF KNOWN PLACE OF BUSINESS ADDRESS, PRINCIPAL OFFICE ADDRESS,  
OR STATUTORY AGENT**

*Read the Instructions C016i*

**NOTE** - no matter what is being changed, numbers 1, 2, 3.1, 5.1, and 5.2 must be completed. The form will be rejected if those sections are not completed.

**1. ENTITY NAME** - give the exact name of the corporation as currently shown in A.C.C. records:  
The Stone Canyon Community Association, Inc.

**2. A.C.C. FILE NUMBER:** 08687021

Find A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/Divisions/Corporations>

**3. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:**

<b>3.1 REQUIRED</b> - list the known place of business address currently shown in A.C.C. records (before any changes):			<b>3.2 Optional</b> - List the NEW known place of business address in Arizona (must be a street or physical address):		
Associa Arizona			HBS Management Solutions		
Attention (optional)			Attention (optional)		
6840 N. Oracle Road, Ste 130			6101 E. Grant Road		
Address 1			Address 1		
Address 2 (optional)		AZ	85704	Address 2 (optional)	
City Tucson	State	Zip	City Tucson	State	Zip
					85712
<b>3.3 If you completed 3.2, is the NEW known place of business address in Arizona the same as the street address of the statutory agent?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

**4. PRINCIPAL OFFICE ADDRESS:**

<b>4.1 Required if changing</b> - list the principal office address currently shown in A.C.C. records (before any changes):			<b>4.2 Optional</b> - List the NEW principal office address (must be a street or physical address):		
W. Grant Parker			Howard Schmitter		
Attention (optional)			Attention (optional)		
C/O Associa Arizona			C/O HBS Management Solutions		
Address 1			Address 1		
6840 N. Oracle Ste 130			6101 E. Grant Road		
Address 2 (optional)		AZ	85704	Address 2 (optional)	
City Tucson	State	Zip	City Tucson	State	Zip
					85712
Country UNITED STATES			Country UNITED STATES		



**5. CURRENT OR EXISTING STATUTORY AGENT** – list the name and addresses of the statutory agent as shown in the records of the Arizona Corporation Commission *before any changes* (this is the existing statutory agent):

<b>5.1 REQUIRED</b> – list the <b>name</b> and <b>physical or street address</b> (not a P.O. Box) in Arizona of the existing statutory agent:			<b>5.2 REQUIRED</b> – list the <b>mailing address</b> (if one exists in A.C.C. records) in Arizona of the existing Statutory Agent:		
W. Grant Parker Statutory Agent Name					
Associa Arizona Attention (optional)			Associa Arizona Attention (optional)		
6840 N. Oracle Road Address 1			6840 N. Oracle Road Address 1		
Ste 130 Address 2 (optional)			ste 130 Address 2 (optional)		
City	State	Zip	City	State	Zip
Tucson	AZ	85704	Tucson	AZ	85704

**5.3**  **CHANGE IN EXISTING STATUTORY AGENT NAME ONLY** – if the *name only* of the existing statutory agent listed in number 5.1 above has changed, but a new agent has not been appointed, check the box and give the new name of the existing statutory agent below:

---

**5.4 CHANGE IN EXISTING STATUTORY AGENT ADDRESS** – check all that apply and follow instructions:

- STREET ADDRESS CHANGED** – complete number 5.5.  
 **MAILING ADDRESS CHANGED** – complete number 5.6.

<b>5.5 NEW STREET ADDRESS</b> – give the NEW physical or street address (not a P.O. Box) in Arizona of the existing statutory agent:			<b>5.6 NEW MAILING ADDRESS</b> – give the NEW mailing address in Arizona of the existing statutory agent (can be a P.O. Box):		
HBS Management Solutions Attention (optional)					
6101 E. Grant Road Address 1					
City	State	Zip	City	State	Zip
Tucson	AZ	85712			



<b>6. <input checked="" type="checkbox"/> NEW STATUTORY AGENT</b> – if a new statutory agent is being appointed, check the box and complete the following for the <b>NEW statutory agent</b> :					
<b>6.1 REQUIRED</b> – give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the NEW statutory agent:			<b>6.2 OPTIONAL</b> – mailing address in Arizona of NEW Statutory Agent (can be a P.O. Box):		
Howard Schmitter					
COHBS Management Solutions					
6101 E. Grant Road					
Tucson			AZ 85712		
<b>6.3 REQUIRED</b> – if you are appointing a new statutory agent, the <b>Statutory Agent Acceptance form M002</b> must be submitted along with this Statement of Change form.					

**SIGNATURE** – see *Instructions CO161* for who is authorized to make changes:

If the person signing this form is the existing statutory agent changing its own address, then by the signature appearing below, the existing statutory agent certifies *under penalty of perjury* that he or she has given the corporation named in number 1 above written notice of the address change.

By checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law.

I ACCEPT  

 Printed Name: David S. Williams Date: 3/10/15

**REQUIRED** – check only one:

<input type="checkbox"/> I am the <b>Chairman of the Board of Directors</b> of the corporation filing this document.	<input checked="" type="checkbox"/> I am a duly-authorized <b>Officer</b> of the corporation filing this document.	<input type="checkbox"/> I am a <b>Statutory Agent</b> changing only my own address and/or my own name.
--	--	---

Filing Fee: None (regular processing) Expedited processing - add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
--	---

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.  
 All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.  
 If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5614.



DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

## STATUTORY AGENT ACCEPTANCE

Please read Instructions M002i

1. **ENTITY NAME** - give the **exact** name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation):

The Stone Canyon Community Association, Inc

2. **STATUTORY AGENT NAME** - give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). **NOTE** - the name must match **exactly** the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

Howard Schmitter, C/O HBS Management Solutions

### 3. STATUTORY AGENT SIGNATURE:

By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

The person signing below declares and certifies *under penalty of perjury* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

  
Signature

Howard Schmitter  
Printed Name

3-9-16  
Date

**REQUIRED** - check only one:

<input type="checkbox"/> <b>Individual as statutory agent:</b> I am signing on behalf of myself as the individual (natural person) named as statutory agent.	<input checked="" type="checkbox"/> <b>Entity as statutory agent:</b> I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.
--	--

Filing Fee: none (regular processing) Expedited processing - not applicable. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
---	---

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.  
All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.  
If you have questions after reading the instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.



RECEIVED

MAR 16 2016

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARIZONA CORPORATION COMMISSION CORPORATIONS DIVISION

COVER SHEET

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

1. WHAT ARE YOU FILING?

New Entity  Change to existing entity  Re-submission/Correction

2. ENTITY NAME:

3. CALCULATE YOUR FEES (copies, certificate of good standing and expedited processing are all optional):

Document filing fee (fees are listed on the bottom of the form or on the fee schedule)	Subtotal:	35.00
Do you want EXPEDITED processing? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, add \$35.00	Subtotal:	
<input type="checkbox"/> Corporation certified copies \$ 5.00 each x (enter number of copies requested)	Subtotal:	
<input type="checkbox"/> LLC certified copies \$10.00 each x (enter number of copies requested)	Subtotal:	
<input type="checkbox"/> Certificate of Good Standing \$10.00 each x (enter number of copies requested)	Subtotal:	
<b>TOTAL YOUR AMOUNT OWED</b>	<b>TOTAL AMOUNT DUE:</b>	

4. PAYMENT METHOD:

MOD Account #

**Cash** - do not mail cash. Cash may be used only for in-person submittals.  
**Checks or money orders** - must be made payable to "Arizona Corporation Commission," with all words spelled out and no abbreviations. Checks must be completely and properly filled out, including the amount sections. UNACCEPTABLE CHECKS include: no imprinted or preprinted name and address of the account holder; no imprinted or preprinted check number; handwritten or stamped names, addresses, or check numbers; temporary checks (new accounts).  
**Credit cards** - may be used for in-person submittals, and for online corporation annual reports, online name reservations, or online certificates of good standing. We accept only Visa, MasterCard, and American Express.

5. REQUIRED - RETURN DELIVERY OPTION (PLEASE PRINT CLEARLY and select only ONE):

<input type="checkbox"/> Email	Email address:	
<input type="checkbox"/> Pick up	Name:	Phone:
<input type="checkbox"/> Mail	Name:	
	Address:	
	City:	State: Zip:
	Phone:	

DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY ONE WEEK)

**FOR ARIZONA CORPORATION COMMISSION USE ONLY**

PICK-UP BY: \_\_\_\_\_ DATE: \_\_\_\_\_

View current processing times at: [www.azcc.gov/Divisions/Corporations/document-processing-times.pdf](http://www.azcc.gov/Divisions/Corporations/document-processing-times.pdf)

