



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

Arizona Corporation Commission



00454593

**DUE ON OR BEFORE 04/30/2002**

**FY01-02**

**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.

**RECEIVED**

**MAR 12 2002**

ARIZONA CORP. COMMISSION  
CORPORATIONS DIVISION

1. **-0977527-0**  
**CYPRESS LANDING COMMUNITY ASSOCIATION, INC.**  
~~2005 W 14TH ST #100~~ 2400 E ARIZONA BILTMORE CIR #1300  
~~TEMPE, AZ 85281~~ PHOENIX, AZ 85016

Business Phone: \_\_\_\_\_ (Business phone is optional.)  
State of Domicile: **ARIZONA** Type of Corporation: **NON-PROFIT**

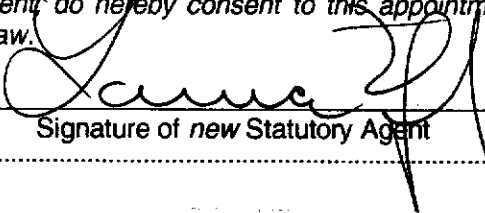
2. Arizona Statutory Agent: ~~LYNN T ZIOLKO~~ LAURA ZIFF  
Street Address: ~~% KUTAK ROCK LLP~~ 2400 E ARIZONA BILTMORE CIR  
~~8601 N SCOTTSDALE RD #300~~ #1300  
City, State, Zip: ~~SCOTTSDALE, AZ 85253-2742~~ PHOENIX, AZ 85016

*Use this box only if appointing a new Statutory Agent*

<b>ACC USE ONLY</b>	
Fee	\$ <u>10</u> 3-13-02
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.*

X   
Signature of new Statutory Agent

3. Secondary Address:  
(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.

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

Number of Shares/Certificates Issued	Class	Series Within Class (if any)
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**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: \_\_\_\_\_

Name: \_\_\_\_\_

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 Type or Print Clearly.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_

Date taking office: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Date taking office: \_\_\_\_\_

Date taking office: \_\_\_\_\_

CYPRESS LANDING COMMUNITY ASSOCIATION, INC.  
BOARD OF DIRECTORS  
FILE ID # 0977527-0

Please make the following corrections to the Board of Directors.

Officers:

President:

Rexford Ross  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

Vice President:

Joseph Thompson  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

Secretary:

Linda Moore  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

Treasurer:

Linda Moore  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

Directors:

Rexford Ross  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

Joseph Thompson  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

Linda Moore  
2005 W 14<sup>th</sup> St #100  
Tempe, AZ 85281  
Elected 01/30/2001

**Balance Sheet (Cash)**  
**CYPRESS LANDING HOA - (292)**  
**Dec 2001**

Prepared For:  
CYPRESS LANDING HOA  
2400 E. AZ BILTMORE CR., #1300  
PHOENIX, AZ 85016

Prepared By:  
ASSOCIATED ASSET MANAGEMENT, INC.  
2400 E. AZ BILTMORE CR., #1300  
PHOENIX, AZ 85016

**ASSETS**

Cash - Operating Account 8,275.88  
Cash - Reserves 3,857.15

**TOTAL ASSETS** 12,133.03

**LIABILITIES & EQUITY**

Current Earnings 12,133.03

**TOTAL LIAB & EQUITY** 12,133.03

**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 Linda S. Moore Date 3-11-02 Name \_\_\_\_\_ Date \_\_\_\_\_

Signature [Handwritten Signature] Signature \_\_\_\_\_

Title Secy / Treas. Title \_\_\_\_\_

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