

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



**DUE ON OR BEFORE** 04/03/1998

11. Education

12. Engineering

15. Health Care

16. Hotel/Motel

18. Insurance

\_\_ 19. Legal Services

\_17. import/Export

13. Entertainment

14. General Consulting

10. Credit/Collection

29. Science/Research

30. Sports/Sporting Events

31. Technology(Computers)

34. Tourism/Convention Services

37. Veterinary Medicine/Animal Care

32. Technology(General)

33. Television/Radio

35. Transportation

36. Utilities

38. Other

FILING FEE \$10

The following information is required by A.R.S. §10-1622 & §10-2501 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. & §10-2545.A. YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. Make changes or corrections where necessary. See instructions for proper format.

REF	ER TO THE INSTRUCTIONS ON PAG	<u>E 4.</u>	-		-	
1.	THE VILLAGE AT WES  ***********************************	T MEADOW T	OWNHOMES AS	SSOC:	IATION	
			ration File Num			-0181966-7
	Business Phone:	Copenial Control of the Control	ສຸຮຸ phone is opຄວດ of Corporation:		- DDOE I T	
	State of Domicile: ARIZONA	, Type (	or Corporation.	NON	,	RECEIVE
2.	Arizona Statutory Agent:	VICKIE KO				KEOLITE.
	Street Address:	3617 E HA	RTFORD			SEP 1 7 1998
	(NOT P.O. BOX) City, State, Zip:	PHOENIX		ΔΖ	85032-	021 2 1 1000
	ACC USE ONLY		&&.&##\$J#\$\$\$############################</td><td></td><td></td><td>ARIZONA CORP. COMMISSION ST consencuring annons division</td></tr><tr><td></td><td>Fee \$ 10 Penalty \$ 4  Reinstate \$</td><td>I, (individual) of designated the</td><td>y signing below. r We, (corporation new Statutory Ag resignation pursu</td><td>gent, d</td><td>o hereby conser</td><td>pany) having been of to this appointment until E I</td></tr><tr><td></td><td>Expedite \$</td><td></td><td>BECE!</td><td>VED</td><td>)</td><td>SEP 1 7 1998</td></tr><tr><td></td><td>FY97-98</td><td>Signature</td><td>0:00 2 4</td><td></td><td></td><td>ARIZONA CORP. COMMISSION CORPORATIONS DIVISION</td></tr><tr><td>3.</td><td>Secondary Address: (Foreign Corporations are PEQUIPED to complete this section.)</td><td></td><td></td><td></td><td>esiON</td><td></td></tr><tr><td>4.</td><td>Check the one category below wh</td><td>iich best describe</td><td>es the CHARACTI</td><td>ER OF</td><td>BUSINESS of y</td><td>our corporation.</td></tr><tr><td></td><td>2. Advertising 21. 3. Aerospace 22. 4. Agriculture 23. 5. Architecture 24. 6. Banking/Finance 25. 7. Barbers/Cosmetology X 26. 8. Construction 27.</td><td>Manufacturing Manufacturing Mining News Media Pharmaceutical Publishing/Printing Ranching/Livestock Real Estate Restaurant/Bar Retail Sales</td><td></td><td>ļ</td><td>NON-PROFIT CORI  Charitable  Charitable  Educational  Civic  Political Religious  Cocial  Literary  Cultural</td><td><u>PORATIONS</u></td></tr></tbody></table>			

10. \_\_ Athletic

17. \_\_ Other\_

13. \_\_ Agricultural

\_\_ Science/Research

\_ Homeowner's Association

Professional, commercial

industrial or trade association

12. \_ Hospital/Health Care

14. \_\_ Animal Husbandry

5. <u>CAPITALIZATION: (Business Corpo</u> Business trusts must indicate the numb the trust estate.	rations and Business Tru per of transferable certific	sts are <b>REQU</b> ates held by tr	IRED to complete this section.) rustees evidencing their beneficial interest in
	od Olava		Out of Market Of the Control of the
Number of Shares/Certificates Authorize	ed Class	· · · · · · · · · · · · · · · · · · ·	Series Within Class (if any)
Number of Shares/Certificates Issued	Class		Series Within Class (if any)
6. SHAREHOLDERS: (Business Corpor List shareholders holding more than 20'	rations and Business Trus % of any class of shares i	sts are <b>REQU</b>	IRED to complete this section.) corporation, or having more than a 20%
beneficial interest in the corporation.  Name:		Name:	
NONE 🗍			
Name		Name:	
7. OFFICERS (If no changes since las	st report, check here	and go on to	Section 8.)
Name: DAVE KRUSE		Name:	XXXXXXXXX BILL MICKLE
PRESIDENT/CEO		Title:	VICE-PRESIDENT
Address: P 0 B0X 31176		Address:	P 0 B0X 31176
PHOENIX, AZ 8504	6-		ÉHOENIX, AZ 85046-
Date taking office: 04-09-96		Date taking	office: ************************************
Name: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	ANN SCHMELING	Name:	J R SCHMELING
SECRETARY Title:		Title:	TREASURER
Address: P 0 B0X 31176		Address:	P 0 B0X 31176
PHOENIX, AZ 85040	6-		PHOENIX, AZ 85046-
Date taking office: <b>基本分享来景长</b> <u>09-0</u>	.8 <u>-9</u> 7	Date taking	office: <u>04-09-96</u>
B. <u>DIRECTORS</u> (If no changes since I	last report, check here _	_ and go on	to Section 9.)
Name: ************************************	ANN SCHMELING	Name:	XXXXXXXXX BILL MICKLE
P 0 B0X 31176 Address:		Address:	P 0 B0X 31176
PHOENIX, AZ 85046	6-		PHOENIX, AZ 85046-
Date taking office:	-97	Date taking	<b>文本文学文章</b> 09-08-97 office:
Name: JR SCHMELING		Name:	DAVE KRUSE
Address: P 0 B0X 31176		Address:	P 0 B0X 31176
PHOENIX, AZ 85046	6		PHOENIX, AZ 85046-
Date taking office: 04-09-96		Date taking	office: 04-09-96

'Date: Village @ West Meadow/Townhomes Assn.

Page:

Balance Sheet

## As of December 31, 1997

CURRENT ASSETS Cash Reserves/Bank of America CD/Provident Bank Accounts Receivable	\$120.02 3,270.80 21,274.05 8,040.06
TOTAL CURRENT ASSETS	\$32,704.93
FIXED ASSETS	
TOTAL FIXED ASSETS	\$.00
TOTAL ASSETS	\$32,704.93
CURRENT LIABLITIES	
FAL CURRENT LIABILITIES	\$.00
OWNERS EQUITY Retained Earnings Net Profit / (Loss)	\$31,570.39 \$1,134.54
TOTAL OWNERS EQUITY	\$32,704.93
- •·· · · · · · · · · · · · · · · · ·	4527.51155

·9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-2501.A.6)

Only corporations that meet one or more of the following criteria must attach a financial statement (balance sheet including assets, liabilities and equity). The corporation is: 1) a public service corporation (e.g., public utility) as defined in Article XV, Section 2, Constitution of Arizona. 2) offers its stock for sale in transactions that are not exempt from A.R.S. §§ 44-1841 and 44-1842 as prescribed in §44-1844.A.1 (e.g., publicly traded). 3) a nonprofit corporation. All other forms of corporations are exempt from filing a financial disclosure.

## 10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622,A.8 & 10-2505,A)

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.

- 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?
- 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?
- 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:	1 E 2 🗆	NOX	

VEC L

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.
- Full birth name. 2.
- 3. Present home address.
- Prior addresses (for immediate 4. preceding 7 year period).

AND ENGINEERING TO THE STATE OF THE STATE OF

- 5. Date and location of birth.
- Social Security Number 6.
- 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 (A.R.S. §10-202.D.2)

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?

One pox must be marked:		IIO IXX	
If YES, enter the following:	Chapter	Date Filed Case Number	

NO @

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 a) incorporated b) transacted business. 3) The dates of corporate operation.

12. CAUTION: Signature requirements vary according to the type of corporation. See the instruction sheet for specific rules. 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.

	iturtner deciare under penalty of law that I (we) have examine	d this report and the certificate, including any attachments, and to
	the best of my (our) knowledge and belief they are true, corre	ct and complete.
	3/0/0	
$\mathbf{X}$	Name it Cerrol Nuse Date 1790	Name Sue Schmeling Date 42/2/198
	Signature Source Source	Signature Sur Chu Schmeleng
	Title we Disk	Title Secretoury
		orate officer(s) listed in section 7 of this report