



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



DUE ON OR BEFORE

4/4/99

FILING FEE \$10.00

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. **REFER TO THE INSTRUCTIONS ON PAGE 4.**

1. LAS CAMPANAS COMMUNITY ASSOCIATION
PO BOX 40790
TUCSON, AZ 85717

Corporation File Number:

-0746354-0

Business Phone: (520) 625-4441

(Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: DOUGLAS R VANDE KROL
Street Address: 7333 E DOUBLETREE RANCH RD 200
(NOT P.O. BOX)
City, State, Zip: SCOTTSDALE AZ 85258-

ACC USE ONLY	
Fee	\$ 10
Penalty	\$
Reinstate	\$
Expedite	\$
Total	\$
FY 98-99	

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.

RECEIVED

Signature

APR 01 1999

3. Secondary Address:
(Foreign Corporations are
REQUIRED to complete
this section.)

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

BUSINESS CORPORATIONS

- | | |
|---|--|
| <input type="checkbox"/> 1. Accounting | <input type="checkbox"/> 20. Manufacturing |
| <input type="checkbox"/> 2. Advertising | <input type="checkbox"/> 21. Mining |
| <input type="checkbox"/> 3. Aerospace | <input type="checkbox"/> 22. News Media |
| <input type="checkbox"/> 4. Agriculture | <input type="checkbox"/> 23. Pharmaceutical |
| <input type="checkbox"/> 5. Architecture | <input type="checkbox"/> 24. Publishing/Printing |
| <input type="checkbox"/> 6. Banking/Finance | <input type="checkbox"/> 25. Ranching/Livestock |
| <input type="checkbox"/> 7. Barbers/Cosmetology | <input type="checkbox"/> 26. Real Estate |
| <input type="checkbox"/> 8. Construction | <input type="checkbox"/> 27. Restaurant/Bar |
| <input type="checkbox"/> 9. Contractor | <input type="checkbox"/> 28. Retail Sales |
| <input type="checkbox"/> 10. Credit/Collection | <input type="checkbox"/> 29. Science/Research |
| <input type="checkbox"/> 11. Education | <input type="checkbox"/> 30. Sports/Sporting Events |
| <input type="checkbox"/> 12. Engineering | <input type="checkbox"/> 31. Technology(Computers) |
| <input type="checkbox"/> 13. Entertainment | <input type="checkbox"/> 32. Technology(General) |
| <input type="checkbox"/> 14. General Consulting | <input type="checkbox"/> 33. Television/Radio |
| <input type="checkbox"/> 15. Health Care | <input type="checkbox"/> 34. Tourism/Convention Services |
| <input type="checkbox"/> 16. Hotel/Motel | <input type="checkbox"/> 35. Transportation |
| <input type="checkbox"/> 17. Import/Export | <input type="checkbox"/> 36. Utilities |
| <input type="checkbox"/> 18. Insurance | <input type="checkbox"/> 37. Veterinary Medicine/Animal Care |
| <input type="checkbox"/> 19. Legal Services | <input type="checkbox"/> 38. Other |

NON-PROFIT CORPORATIONS

- | |
|---|
| <input type="checkbox"/> 1. Charitable |
| <input type="checkbox"/> 2. Benevolent |
| <input type="checkbox"/> 3. Educational |
| <input type="checkbox"/> 4. Civic |
| <input type="checkbox"/> 5. Political |
| <input type="checkbox"/> 6. Religious |
| <input type="checkbox"/> 7. Social |
| <input type="checkbox"/> 8. Literary |
| <input type="checkbox"/> 9. Cultural |
| <input type="checkbox"/> 10. Athletic |
| <input type="checkbox"/> 11. Science/Research |
| <input type="checkbox"/> 12. Hospital/Health Care |
| <input type="checkbox"/> 13. Agricultural |
| <input type="checkbox"/> 14. Animal Husbandry |
| <input checked="" type="checkbox"/> 15. Homeowner's Association |
| <input type="checkbox"/> 16. Professional, commercial |
| Industrial or trade association |
| <input type="checkbox"/> 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) **0746354-0**

Number of Shares/Certificates Issued

Class

Series Within Class (if any)

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.

Name: _____

Name: _____

NONE ☒

Name: _____

Name: _____

7. OFFICERS (If no changes since last report, check here _____ and go on to Section 8.)

Name: DAVID J WILLIAMSON

Name: ~~ROGER GIACHETTI~~

Title: PRESIDENT/CEO

Title: ~~VICE-PRESIDENT~~Address: P O BOX 587
GREEN VALLEY, AZ 85622-Address: ~~P O BOX 587
GREEN VALLEY, AZ 85622-~~

Date taking office: 04-04-95

Date taking office: ~~03-31-96~~

Name: CAROL JOHNSON

Name: CAROL JOHNSON

Title: SECRETARY

Title: TREASURER

Address: P O BOX 587
GREEN VALLEY, AZ 85622-Address: P O BOX 587
GREEN VALLEY, AZ 85622-

Date taking office: 12-03-96

Date taking office: ~~12-03-96~~**8. DIRECTORS** (If no changes since last report, check here _____ and go on to Section 9.)

Name: CAROL JOHNSON

Name: ~~ROGER GIACHETTI~~

Address: P O BOX 587

Address: ~~P O BOX 587~~

GREEN VALLEY, AZ 85622-

~~GREEN VALLEY, AZ 85622-~~

Date taking office: 12-03-96

Date taking office: ~~03-31-96~~

Name: DAVID J WILLIAMSON

Name: _____

Address: P O BOX 587

Address: _____

GREEN VALLEY, AZ 85622-

Date taking office: 04-04-95

Date taking office: _____

LAS CAMPANAS COMMUNITY ASSOCIATION

OFFICERS

Michael J. Bowman
President
P.O. Box 587
Green Valley, AZ 85622

Date taking office: *2-12-99*

David J. Williamson.
Vice President
P.O. Box 587
Green Valley, AZ 85622

Date Taking Office: *2-12-99*

Carol M. Johnson
Secretary
P.O. Box 587
Green Valley, AZ 85622

Date Taking Office: *12-3-96*

Carol M. Johnson
Treasurer
P.O. Box 587
Green Valley, AZ 85622

Date Taking Office: *12-3-96*

DIRECTORS

Michael J. Bowman
P.O. Box 587
Green Valley, AZ 85622

Date Taking Office: *2-12-99*

David J. Williamson
P.O. Box 587
Green Valley, AZ 85622

Date Taking Office: *4-4-95*

Carol M. Johnson
P.O. Box 587
Green Valley, AZ 85622

Date Taking Office: *12-3-96*

Black & Soli, P.C.

Certified Public Accountant



COMPILATION REPORT

March 13, 1999

Board of Directors
Las Campanas Community Assoc.
PO Box 587
Green Valley, AZ 85622-0587

The Balance Sheet of Las Campanas Community Assoc., as of December 31, 1998, included in the accompanying prescribed form has been compiled by us.

Our compilation was limited to presenting in the form prescribed by the Arizona Corporation Commission Annual Report information that is the 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 on it.

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

Sincerely,

Stephen J. Soli Sr., C.P.A.
Black and Soli, P.C.
Certified Public Accountant

03/12/99

Las Campanas Community Assoc.

Balance Sheet

As of December 31, 1998

Dec 31, '98

ASSETS

Current Assets

Checking/Savings

Checking (new BOne)

9,364.79

Money Market

20,948.41

Total Checking/Savings

30,313.20

Total Current Assets

30,313.20

TOTAL ASSETS

30,313.20

LIABILITIES & EQUITY

Liabilities

Current Liabilities

Other Current Liabilities

Accounts payable

10,658.54

Loan from Developer

8,200.00

Total Other Current Liabilities

18,858.54

Total Current Liabilities

18,858.54

Total Liabilities

18,858.54

Equity

Fund Balance - Operating

1,234.05

Retained Earnings

-903.99

Net Income

11,124.60

Total Equity

11,454.66

TOTAL LIABILITIES & EQUITY

30,313.20

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:

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)

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 box must be marked:YES ☐NO ☒

If YES, enter the following:

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 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.

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 Michael J. Bowman Date 3-30-99 Name Carol M. Johnson Date 3-3-99

Signature *Michael J. Bowman* Signature *Carol M. Johnson*

Title President Title Secretary/Treasurer

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