



COPY

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

Arizona Corporation Commission



00036684

DUE ON OR BEFORE 04/12/1999

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.**

1. THE BRIARWOOD HOMEOWNERS ASSOCIATION, INC.

~~% THOMPSON MANAGEMENT INC~~ c/o Kachina Management + Consulting
~~7119 E SHEA BLVD #109~~ PO Box 12170
~~SCOTTSDALE, AZ 85254~~ Glendale AZ 85318-2170

5-4-99

(623) 572-7579

Corporation File Number:

-0086743-8

Business Phone:

(Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2. Arizona Statutory Agent: HELEN CORSON R. MARK Rounsaville
Street Address: 7119 E SHEA BLVD #109 6979 W. Morning Dove DR
(NOT P.O. BOX) Glendale AZ 85308
City, State, Zip: SCOTTSDALE AZ 85254

Use this box only if appointing a new Statutory Agent

ACC USE ONLY

Fee \$ 10 PAID
Penalty \$
Reinstate \$
Expedite \$
Total \$
FY98-99

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.

Signature of new Statutory Agent

A.C.C. CORPORATIONS DIV.
RECEIVED

MAY 04 1999

3. Secondary Address:

(Foreign Corporations are
REQUIRED to complete
this section.)

DOCUMENTS ARE SUBJECT
TO REVIEW BEFORE FILING

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)

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 (Attach additional sheets if necessary.)Name: Linda EalesTitle: PresidentAddress: 7347 E. Solcito
Scottsdale AZ 85250Date taking office: 3-9-99Name: Barbara RockwellTitle: VPAddress: 7350 E Rovey
Scottsdale AZ 85250Date taking office: 3-9-99Name: Shannon BradyTitle: TreasurerAddress: 7327 E. Rovey
Scottsdale AZ 85250Date taking office: 3-9-99Name: Bill NenstielTitle: SecretaryAddress: 6031 N. 73rd Way
Scottsdale AZ 85250Date taking office: 3-9-99**8. DIRECTORS** (If no changes since last report, check here _____ and go on to Section 9.)Name: BARBARA ROCKWELLAddress: 7325 E ROVEYSCOTTSDALE, AZ 85250-Date taking office: 10-24-96Name: LINDA EALESAddress: 7347 E SOLCITOSCOTTSDALE, AZ 85250-Date taking office: 04-11-96Name: JUDY WOLFSWINKLEAddress: 7316 E SOLCITO7327 E ROVEY
SCOTTSDALE, AZ 85250-Date taking office: 02-13-97 3-9-99Name: MARCI WHITE Bill NenstielAddress: 7332 E BERRIDGE LN6031 N 73rd Way
SCOTTSDALE, AZ 85250-Date taking office: 02-13-97 3-9-99

**STATE OF ARIZONA
CORPORATION COMMISSION**

**NONPROFIT CORPORATION ANNUAL REPORT
& CERTIFICATE OF DISCLOSURE**

The Briarwood Homeowners Association, Inc.

Corporation File: 0086743-8

Director Changes to Annual Report for Fiscal Year Ending 12/31/98

8. ADDITIONAL DIRECTORS

NAME: Sherry Goldman
Address: 7308 E. Rovey
Scottsdale, AZ 85250

Date taking office: 3-9-99

NAME: Suzanne Ayerst
Address: 7333 E. Berridge Lane
Scottsdale, AZ 85250

Date taking office: 3-9-99

The Briarwood Homeowners Association, Inc.**Balance Sheet**

As of December 31, 1998

	<u>Dec 31, '98</u>
ASSETS	
Current Assets	
Checking/Savings	
Checking - M&I Thunderbird Bank	5,602.80
TCD - M&I Thunderbird Bank	24,210.39
Total Checking/Savings	29,813.19
Accounts Receivable	
Prepaid Assessments	-5,825.55
Total Accounts Receivable	-5,825.55
Other Current Assets	
US West - Deposit	100.00
Total Other Current Assets	100.00
Total Current Assets	24,087.64
TOTAL ASSETS	<u>24,087.64</u>
LIABILITIES & EQUITY	
Equity	
Homeowners' Equity	24,816.61
Net Income	-728.97
Total Equity	24,087.64
TOTAL LIABILITIES & EQUITY	<u>24,087.64</u>

9. FINANCIAL DISCLOSURE (A.R.S. §§10-1622.B & 10-11622.A.9)

Only 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 ☒

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. 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 Eales Date 4-19-99 Name _____ Date _____

Signature [Signature] Signature _____

Title President Title _____

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