



WEB FORM  
 COPY

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



DUE ON OR BEFORE 04/16/2006 FY05-06 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 on page 4 for proper format.

1. -1045583-4  
 ODYSSEY PROFESSIONAL CENTER UNIT OWNERS ASSOCIATION  
 % VICTORIA PROP. MANG. LLC  
 637 S. 48TH ST.  
 SUITE #212  
 TEMPE, AZ 85281

RECEIVED  
 APR 10 2006

ARIZONA CORP. COMMISSION  
 CORPORATIONS DIVISION

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

2. Statutory Agent: GEORGE E GRIFFETA ESQ Physical Address, If Different:  
 Mailing Address: 8124 E CACTUS RD #410 Physical Address:  
 City, State, Zip: SCOTTSDALE, AZ 85260 City, State, Zip:

ACC USE ONLY  
 Fee \$10  
 Penalty \$  
 Reinstate \$  
 Expedite \$  
 Resubmit \$

Use this box only if appointing a new Statutory Agent

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

Printed Name 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. Raising/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. Religious
- 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. PLEASE PRINT OR TYPE CLEARLY.

5a. Please examine the corporation's original Articles of Incorporation for the amount of shares authorized.

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

NIA

5b. Review all corporation amendments to determine if the original number of shares has changed. Examine the corporation's minutes for the number of shares issued.

Number of Shares/Certificates Issued                      Class                      Series Within Class (if any)

NIA

**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 PRINT OR TYPE CLEARLY.

NONE  Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Name: \_\_\_\_\_ Name: \_\_\_\_\_

**7. OFFICERS** PLEASE PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: MARK BURDORF

Name: JOHN DOMBROSKE, JR.

Title: PRESIDENT

Title: SECRETARY

Address: 8140 E CACTUS #730  
SCOTTSDALE, AZ 85260

Address: 10645 N. TATUM BLVD STE 206-603  
PHOENIX, AZ 85028

Date taking office: 12/05

Date taking office: 12/05

Name: MICHAEL WINER

Name: DARREN SIGRIST

Title: VICE PRESIDENT

Title: TREASURER

Address: 8124 E. CACTUS #400  
SCOTTSDALE, AZ 85260

Address: 8110 E. CACTUS #110  
SCOTTSDALE, AZ 85260

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

Date taking office: 11/10/04

**8. DIRECTORS** PLEASE PRINT OR TYPE CLEARLY. YOU MUST LIST AT LEAST ONE.

Name: GEORGE GRIFFETH

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

Address: 8124 E CACTUS #410  
SCOTTSDALE, AZ 85260

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

Date taking office: 11/10/04

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

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

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

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

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

\_\_\_\_\_

\_\_\_\_\_

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

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

*Richard W. Wiggs, P.C.*

(480) 777-9566

*Certified Public Accountant*

2111 East Baseline Road  
Suite E-3  
Tempe, Arizona 85283

**Board of Directors  
Odyssey Professional Center Unit Owners Association**

**I have compiled the accompanying statement of financial position of Odyssey Professional Center Unit Owners Association as of December 31, 2005 and the related statements of activities and cash flows – indirect method for the year ended December 31, 2005, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.**

**A compilation is limited to presenting in the form of financial statements information that is the representation of management. I have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or any other form of assurance on them.**

**Management has elected to omit substantially all financial statement disclosures. If the omitted disclosures were included in the financial statements, they might influence the user's conclusions about the Association's financial position. Accordingly, these financial statements are not designed for those who are not informed about such matters.**

*Richard W. Wiggs, P.C.*

**Richard W. Wiggs, P.C.**

**March 27, 2006**

ODYSSEY PROFESSIONAL CENTER UNIT OWNERS ASSOCIATION

STATEMENT OF FINANCIAL POSITION

DECEMBER 31, 2005

ASSETS -

Unrestricted assets -

Cash - operating account	\$ 29,478
Accounts receivable	343
Utility deposit	175
	<u>29,996</u>

Permanently restricted assets -

Cash - reserve account	<u>54,685</u>
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Total assets 84,681

LIABILITIES -

Prepaid monthly assessments	495
Security deposits	6,451
	<u>6,946</u>

NET ASSETS -

Unrestricted assets	23,050
Permanently restricted assets	<u>54,685</u>

Total net assets \$ 77,735

SEE ACCOUNTANT'S COMPILATION REPORT

**ODYSSEY PROFESSIONAL CENTER UNIT OWNERS ASSOCIATION**

**STATEMENT OF ACTIVITIES**

**FOR THE YEAR ENDED DECEMBER 31, 2005**

Change in unrestricted net assets -		
Revenue -		
Member assessments		\$115,091
Transfer to permanently restricted net assets		
		( 17,467 )
Expenses -		
Postage and freight	\$ 266	
Garbage removal	3,662	
Insurance	7,872	
Window cleaning	7,620	
Pest control	683	
Parking lot sweeping	555	
Office supplies	727	
Property maintenance and landscaping	13,531	
Day porter services	4,631	
Property management	18,000	
Accounting services	250	
Bank fees	38	
Signage	1,366	
Repairs and maintenance	4,327	
Exterior lights	583	
Taxes and licenses	66	
Security/fire alarms	1,944	
Electricity	6,442	
Telephone	5,758	
Water and sewer	<u>11,037</u>	<u>89,358</u>
Increase in unrestricted net assets		8,266
Change in permanently restricted net assets -		
Revenue -		
Member assessments - reserve account	\$ -	
Interest income	<u>956</u>	956
Transfer from unrestricted net assets		
		17,467
Expenses		
		<u>-</u>
Increase in permanently restricted net assets		<u>18,423</u>
Increase in net assets		26,689
Net assets at beginning of year		<u>51,046</u>
Net assets at end of year		<u><u>\$ 77,735</u></u>

SEE ACCOUNTANT'S COMPILATION REPORT

ODYSSEY PROFESSIONAL CENTER UNIT OWNERS ASSOCIATION

STATEMENT OF CASH FLOWS - INDIRECT METHOD

FOR THE YEAR ENDED DECEMBER 31, 2005

Change in net assets		\$ 26,689
Adjustments to reconcile change in net assets to net cash provided by operating activities -		
Decrease in accounts receivable	\$ 9,231	
Increase in prepaid monthly assessments	495	
Increase in permanently restricted net assets	<u>( 18,423 )</u>	<u>( 8,697 )</u>
Net cash provided by operating activities		<u>\$ 17,992</u>

SEE ACCOUNTANT'S COMPILATION REPORT

Please Enter Corporation Name: ODYSSEY PROFESSIONAL CENTER UNIT OV File number -1045583-4 Page 3

**9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.6)**

Nonprofit corporations must attach a financial statement (e.g. income/expense statement, balance sheet including assets, liabilities). All other forms of corporations are exempt from filing a financial disclosure.

**9A. MEMBERS (A.R.S. § 10-11622.A.6)**

Only Nonprofit Corporations must answer this question.

This corporation **DOES**  **DOES NOT**  have members.

**10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.3 & 10-11622.A.7)**

Has ANY person serving either by election or appointment as an officer, director, trustee, incorporator and/or 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 business 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, RECEIVERSHIP or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.D.2, 10-1623 & 10-11623)**

A) Has the corporation filed a petition for bankruptcy or appointed a receiver? One box must be marked: YES  NO

B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR held or controlled over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any other corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?

Underlined portion pertains to business corporations only One box must be marked: YES  NO

If "YES" to A and/or B, 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. (e.g. officer, director, trustee or major stockholder)
2. The state in which each corporation was a) incorporated b) transacted business.
3. The dates of corporate operation.
4. If any involved person (listed in #1) has been involved in any other bankruptcy proceeding within the past year, the name and address of each corporation.
5. Date, Case number and Court where the bankruptcy was filed or receiver appointed.
6. Name and address of court appointed receiver.

**12. SIGNATURES: Annual Reports must be signed and dated by at least one duly authorized officer or they 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.

X Name MARK BURDORF Date 3-27-06 Name \_\_\_\_\_ Date \_\_\_\_\_

X Signature [Signature] Signature \_\_\_\_\_

X Title Pres,董事 Title \_\_\_\_\_

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