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2.

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

1916

DUE ON OR BEFORE 05/20/2007

FY06-07

FILING FEE \$45.00

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.

RECEIVED

-0509037-2
SONORAN BUILDERS, LTD.
PO BOX 26443
TUCSON, AZ 85726-6443

APR 3 0 2007

ARIZONA CORP COMMISSION
CORPORATIONS DIVISION

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

Statutory Agent: GEORGE D ASHBROOK

Mailing Address: PO BOX 26443

City, State, Zip: TUCSON, AZ 85726-6443

Physical Address, If Different.

Physical Address: 3655 8 HUNTERS RUN City, State, Zip: TUCSON, AZ 85726

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

	tory agent, the new agent MUST consent to that
opointment by signing t	elow.
-12-2-4 D 141 (1*	
dividual) or vve, (corporation i	or limited liability company) having been designated the new Statutor
idividual) or we, (corporation in tereby consent to this appoint	or limited liability company) having been designated the new Statutor ment until my removal or resignation pursuant to law.
dividual) or We, (corporation lereby consent to this appoint	or limited liability company) having been designated the new Statutor nent until my removal or resignation pursuant to law.

3. Secondary Address:

(Foreign Corporations are <u>REQUIRED</u> to complete this section).

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

BUSINESS CORPORATIONS

NON-PROFIT CORPORATIONS

CHATIONS	
20. Manufacturing	
21. Mining	
22. News Media	
23. Pharmaceutical	
24. Publishing/Printing	
25. Ranching/Livestock	
26. Real Estate	
27 Restaurant/Bar	٠
28. Retail Sales	
29. Science/Research	
30. Sports/Sporting Events	
31, Technology(Computers)	
33. Television/Radio	
34. Tourism/Convention Services	
35. Transportation	
36. Utilities	
37. Veterinary Medicine/Animal Care	
38. Other	

NON-P	<u>ROFIT CORPORATIONS</u>
1 (Charitable
2	Benevolent
3 6	Educational
4 (Civic
5 F	Political Political
6 i	Religious
7 {	Social
8 l	_iterary
9 (Cultural
10 /	Athletic
11 \$	Science/Research
12	Hospital/Health Care
13 /	Agricultural
14 /	Animal Husbandry
15 H	lomeowner's Association
16	Professional, commercial
i	ndustrial or trade association

17. __ Other_

5. CAPITALIZATION: (Business Corporations and Business Tru	sts are REQUIRED to complete this section.)
Business trusts must indicate the number of transferable certifithe trust estate. Please Print or Type Clearly.	
5a. Please examine the corporation's original Articles of Inc.	corporation for the amount of shares authorized.
Number of Shares/Certificates Authorized Slass	Series Within Class (if any)
5b. Review all corporation amendments to determine if t corporation's minutes for the number of shares issued	he original number of shares has changed. Examine the
Number of Shares/Certificates Issued Slass	Series Within Class (if any)
6. SHAREHOLDERS: (Business Corporations and Business Tr	usts are REQUIRED to complete this section.)
List shareholders holding more than 20% of any class of shar beneficial interest in the corporation. Please Type or Pr	es issued by the corporation, or having more than a 20% int Clearly. Name: SORGE V. ASHBROOK I
NONE Name: OURTNBY), ASHBI	200K Name:
7. OFFICERS Please Type or Print Clearly. Y	
Name: GEORGE D. ASHBROOK	Name: GEORGE V, HSHBROOK
Title: 12510897	Title: CEO
Address: 10 130x 26443	Address: POBOx 26443
Tuesa, Az 85,726	TUCSON, AZ 85726
Date taking office: 12/15/96	Date taking office: 12/15/02
Name: DENIFER A, ASHBROOK	Name: COURTNEY DI ASHTSROOT
Title: SECIZETARY	Title: CFO
Address: POBox 26443	Address: POBox 26443
TUCON AZ 857726	Wicson 12 85726
Date taking office: 12/15/96	Date taking office: 12/15/96
8. <u>DIRECTORS</u> Please Type or Print Clearly. Y	ou Must List at Least One.
Name: GEORGE D. ASHIBROOK	Name: COORTINGS J. ASHBROOK
Address: <u>POBox 26443</u>	Address: <u>POBox 26443</u>
TUCSON, AZ 85726	TUCSON, AR. 25726
Date taking office: 4/6/1983	Date taking office: 4/16/1983
Name: SEORGE V. 1-SHBROOK	Name:
Address: 10 130x 26443	Address:
Date taking office:	Date taking office:

Please	Enter Corporation Name:	·		File numb	oer	Page 3
# ·						
	IANCIAL DISCLOSURE (A.R.S. §10-11622.A.			mak da ada a a a a a a a a a a a a a a a	dlana annata kintat	1974
orms c	of the corporations must attach arifinancial statement (end for corporations are exempt from filing a financial dis	closure.	expense stateme	nt, balance sneet includ	ııng assets, liabi	lities). All other
A. <u>M</u>	EMBERS (A.R.S. § 10-11622.A.6)					
Only	Nonprofit Corporations must answer this question.	This	corporation C	OES DOES	NOT 🗖 hav	e members.
in CE	RTIFICATE OF DISCLOSURE (A.R.S. §§10-	1600 4 0 9	10 11633 A 7	· •		
las AN	Y person serving either by election or appointment a	s an officer.	director, trustee.	/ incorporator and/or pe	rson controllina	or holding more
nan 10	<u>% of the issued and outstanding common shares or</u>	10% of any	other proprietar	v, beneficial or membe	rship interest in	the corporation
een: [Underlined portion pertains to business corpora	itions only]				
i. C	convicted of a felony involving a transaction in securi	ities, consum	ner fraud or antii	rust in any state or fede	eral jurisdiction v	within the seven
y.	ear period immediately preceding the execution of t	his certificat	e?		•	
2. C	convicted of a felony, the essential elements of which	consisted o	f fraud, misrepr	esentation, theft by fals	e pretenses or re	estraint of trade
3. C	r monopoly in any state or federal jurisdiction within or are subject to an injunction, judgment, decree or p	i the seven y	ear period imm	ediately preceding exec	cution of this cer	rtificate?
ir	nmediately preceding execution of this certificate wh	iere such ini	unction, judgme	nt, decree or permanen	t order involved	the violation of:
	 (a) fraud or registration provisions of the securiti 	ies laws of tf	nat jurisdiction,	or		
	(b) the consumer fraud laws of that jurisdiction,(c) the antifrust or restraint of trade laws of that			•		
	(c) the antificial of restraint of trade laws of that j	jurisalicitori?	· · · · · · · · · · · · · · · · · · ·		l vec 🗗	NO VZI
				must be marked:	YES 🗇	NOX
	5", the following information must be submit actions stated in Items 1. through 3. above.	itted as an	attachment to	this report for each po	erson subject t	o one or more
1.	Full name and prior names used.	5.	Date and locati	on of hirth		
2.	Full birth name.	6.	Social Security			
3.	Present home address.	7.		description of each cor		
4.	Prior addresses (for immediate preceding 7 year period).			ation; the court and pul	olic agency invo	lved, and
	preceding 7 year period).		the me or cause	e number of the case.		ú
1. <u>ST</u>	<u>ATEMENT OF BANKRUPTCY, RECEIVERSH</u>	IIP or CHA	RTER REVO	CATION (A.R.S. §§10	0-202.D.2, 10-	3202.D.2, 10-
623 &	10-11623)				-	٠
) Has	the corporation filed a petition for bankruptcy or app	pointed a rec	eiver? One b	ox must be marked:	YES 🗇	NO)ZĮ
) Has	any person serving as an officer, director, trustee or	incorporato	r of the corporat	ion served in any such	capacity OR he	d or controlled
ver 20	% of the issued and outstanding common shares, tion which has been placed in bankruptcy, receiversh	<u>, or 20% of a</u>	any other propri	etary, beneficial or me	mbership intere	st in any other
	liction?	iip Oi Hau iis	charter revoked	, or administratively or j	udicially dissolv	ed by any state
Underl	Ined portion pertains to business corporations	onivi	One h	oox must be marked:	YES 🗇	NOVZ
				ox <u>made</u> do markod.		
If "YE	S" to A and/or B, the following information mu	et he suhmi	itted as an attac	chment to this report fo	or each nereon s	subject to the
staten	nent above.	or oc caomi	itiou do an atta	rational to talle report to	n each person s	subject to trie
1.	The names and addresses of each corporation	n and the pe	erson or person	s involved. (e.g. office	er, director, trus	tee or major
2.	stockholder) The state in which each corporation was a) incor	rnorated b) t	zaneacted busin	200		
3.	The dates of corporate operation.	porated by t	ransacieu busin	ess.		1
4.	If any involved person (listed in #1) has been inv	volved in an	y other bankruj	otcy proceeding within	the past year, th	ne name and
_	address of each corporation.					
5. 6.	Date, Case number and Court where the bankrul Name and address of court appointed receiver.	ptcy was file	d or receiver ap	pointed.		
U.	realitie and address or count appointed receiver.			•		
2. <u>Sic</u>	NATURES: Annual Reports must be signed a	and dated b	y at least one	duly authorized office	er or they will b	<u>e rejected.</u>
deciar	e, under penalty of law that all corporate incom-	e tax return	s required by 1	itle 43 of the Arizona	Revised Status	tes have been
led wi	th the Arizona Department of Revenue. I furthe	r declare u	nder penalty of	law that I (we) have e	examined this a	report and the
erunica Z	ate, including any attachments, and to the best	ar my (our)	Knowledge and	I belief they are true,	correct and co	mplete.
lame	SECREC VILLENIAN Date 4/	70/9 <i>1</i> 7	- 1e	e e e e e e	Date	
						
ignat	ure	Sigr	nature	· · · · · · · · · · · · · · · · · · ·		
''AJ -	PROIDAG					-
itle	(Signator(s) must be duly authorize	Titl		nd in postion 7 season		
	(Signator(s) must be duly authorize	zu corporate	e omicer(s) liste	a in section / of this	report.)	