

E-FILED

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

02331149



DUE ON OR BEFORE

10/28/2007

FY07-08

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. -0797085-4 EL MIRAGE SENIOR VILLAGE 12424 WEST THUNDERBIRD ROAD EL MIRAGE, AZ 85335

State of Domicile: ARIZONA Type of Corporation: NON-PROFIT

2. Statutory Agent: CORPORATION SERVICE COMPANY Physical Address, If Different.

Mailing Address: 2338 W ROYAL PALM RD STE J Physical Address: City, State, Zip: PHOENIX, AZ 85021 City, State, Zip: AZ

ACC USE ONLY			
Fee	\$	10.00	
Penalty	\$		
Reinstate	\$	0.00	
Expedite	\$		
Resubmit	\$		

## Use this box only if appointing a new Statutory Agent

If appointing a <u>new</u> 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 <u>**REQUIRED**</u> to complete this section).

4. CHARACTER OF BUSINESS

CHARITABLE

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

Number of Shares/Certificates Authorized

Class

Series Within Class (if any)

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)

**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.

NONE

## 7. OFFICERS

Name: RICHARD BANKS Name: LISA CELANIA Title: PRESIDENT/CEO Title: SECRETARY

Address: 1999 BROADWAY #1000 Address: 1999 BROADWAY #1000

DENVER, CO 80202 DENVER, CO 80202

Date Taking Office: 10/16/2006 Date Taking Office: 10/16/2006

Name: Name: Title: Title: Address: Address:

Date Taking Office: Date Taking Office:

## 8. DIRECTORS

Name: RICHARD BANKS Name: Address: 1999 BROADWAY #1000 Address:

> DENVER, CO 80202 Date Taking Office:

Date Taking Office: 10/16/2006

Name: Name: Address: Address:

Date Taking Office: Date Taking Office:

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9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9)	g. income/expense statement, balance sheet including assets, liabilities).			
All other forms of corporations are exempt from filing a finance				
9A. <u>MEMBERS</u> (A.R.S. § 10-11622.A.6)				
Only Nonprofit Corporations must answer this question.	This corporation <b>DOES \overline{\overline{\pi}} DOES NOT</b> \overline{\overline{\pi}} have members.			
10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-162	22.A.8 & 10-11622.A.7)			
Has ANY person serving either by election or appointment as ar	n officer, director, trustee, incorporator <u>and/or person controlling or holding</u>			
more than 10% of the issued and outstanding common sharest corporation been: [Underlined portion pertains to business	s or 10% of any other proprietary, beneficial or membership interest in the corporations only!			
<ol> <li>Convicted of a felony involving a transaction in securities seven year period immediately preceding the execution</li> </ol>	s, consumer fraud or antitrust in any state or federal jurisdiction within the			
2. Convicted of a felony, the essential elements of which co	onsisted 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:				
<ul><li>(a) fraud or registration provisions of the securities</li><li>(b) the consumer fraud laws of that jurisdiction, or</li></ul>	laws of that jurisdiction, or			
(c) the antitrust or restraint of trade laws of that juris	sdiction?			
	One box <u>must</u> be marked: YES  NO 🖵			
	ed 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			
<ol> <li>Present home address.</li> <li>Prior addresses (for immediate</li> </ol>	7. The nature and description of each conviction or judicial action; the date and location; the court and public agency involved, and			
preceding 7 year period).	the file or cause number of the case.			
11 STATEMENT OF BANKRUPTCY RECEIVERSHIP	or CHARTER REVOCATION (A.R.S. §§10-202.D.2, 10-3202.02,			
10-1623 & 10-11623)	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
A) Has the corporation filed a petition for bankruptcy or appoir	nted a receiver? One box must be marked: YES D NO 🗓			
B) Has any person serving as an officer, director, trustee or	incorporator of the corporation served in any such capacity OR held or			
	shares, or 20% of any other proprietary, beneficial or membership interest			
dissolved by any state or jurisdiction?	y, receivership or had its charter revoked, or administratively or judicially			
[Underlined portion pertains to business corporations on	One box <u>must</u> be marked: YES  NO 🖾			
If "YES" to A and/or B, the following information must be	he submitted as an attachment to this report for each person subject to the			
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.				
The names and addresses of each corporation a stockholder)	and the person or persons involved. (e.g. officer, director, trustee or major			

- 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.

Name	LISA CELANIA	_Date 02/29/2008
Signa	ture LISA CELANIA	
Title_	SECRETARY	
	(Cianator(c) must be duly	authorized cornerate officer(c) listed in coation 7 of this report

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

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STATEMENT OF FINANCIAL POSITION For The Year Ended: 06/30/2007

No Assets or Liabilities to Report.