

**WEB FORM** COPY

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





DUE ON OR BEFORE 04/13/2008

16. Hotel/Motel

👝 18. Insurance

17. Import/Export

19. Legal Services

2535. Transportation

37. Votorinary Medicine/Anama, Care

35. Utilities

38. Other

FY07-08

FILING FEE \$10.00

16. Professional, commercial

17. 🖾 Other

industrial or trade association

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. nformation

	MITTED ON THIS ORIGINAL FORM. Make e current status of the corporation. See instr	changes or corrections where necessary. Inform ructions on page 4 for proper format.
-0197284-6		RECEIVED
TRADE WINDS AT 58 W BUFFALO S	·· <del>-</del>	MAR 1 9 2008
CHANDLER, AZ 8	0225	АЯІ <b>ZONA СОНЯ</b> СОММІSSION - СОН <b>ЕВН</b> ИТИВЬОМІ
* AD-DISSOLVED-FILE AN Business Phone:	NUAL REPORT 11/26/2007: CONTACT TH	
State of Domicile:	RIZONA Type of Corporation	<del> </del>
	WBINEALO ST #200 Mar HANDLER, AZ 85225 6303	k A. Vander Stoep S. Rural Rd. Ste 3 pe, AZ 85283
ACC USE ONLY	Use this box only if app	ointing a new Statutory Agent
Fee \$	If appointing a <u>new</u> statutory agent, to	ne new agent MUST consent to that
Penalty \$	appointment by signing below.	company) having been designated the new Statutory Agent,
Reinstale \$  Expedite \$	do hereby content to this appointment untilly year	noval or resignation pursuant to law.
Resubmit \$	Signature of <i>new</i> Statutory A	gent
L,	Printed Name of new Statuto	ry Agent
BUSINESS CORF  1. Accounting 2. Advertising 3. Aerospace 4. Agriculture 5. Architecture 6. Banking/Finance 7. Barbers/Cosmetology 8. Construction 9. Contractor 10. Credit/Coffection	Delow which best describes the CHARACTE PORATIONS  20. Manufacturing 21. Mining 22. News Media 23. Pharmaceutical 24. Publishing/Printing 25. Ranching/Livestock 26. Real Estate 27. Restaurant/Bar 28. Retail Sales 29. Science/Research	NON-PROFIT CORPORATIONS  1. Charitable 2. Senevolent 3. Educational 4. Chric 5. Political 6. Religious 7. Social 8. Literary 9. Cultural 10. Athletic
11. Education 12. Engineering 13. Entertainment 14. General Consulting 15. Health Care		11. Science/Research 12. Hospital/Health Care 13. Agricultural 14. Animal Husbandry 15. Homeoweer's Association

Date taking office:

5. CAPITALIZATION: (Business Corporations and E	Susiness Trusts are	REQUIRED to complete this section )
Business trusts must indicate the number of transfe	rable certificates h	neld by trustees evidencing their beneficial interest in
the trust estate. PLEASE PRINT OR TYPE CLEARE	<b>.</b> Y. ,	
<ol> <li>Please examine the corporation's original A</li> </ol>	rticles of Incorpora	ation for the amount of shares authorized.
Number of Shares/Certificates Authorized	Class	Series Within Class (if any)
0		
<b>5b.</b> Review all corporation amendments to de corporation's minutes for the number of <b>sha</b>		ginal number of shares has changed. Examine the
Number of Shares/Certificates Issued	Class	Series Within Class (if any)
0		
6. SHAREHOLDERS: (Business Corporations and	Rusinoss Trusts or	e PEOLIPED to complete this section )
		ued by the corporation, or having more than a 20%
beneficial interest in the corporation.		
Name:	Nan	ne:
NONE	Nar	me:
7. OFFICERS PLEASE TYPE OR PRINT CLI		
Name: BAVE SYMS	•	e: MONICA DELBRIDGE
Title: PRESIDENT	Title:	OFORESTA DV
Address: 58 W BUFFALO ST #200		
	Addre	ess: 58 W BUFFALO ST #200
CHANDLER, AZ 85225	<u> </u>	CHANDLER, AZ 85225
Date taking office:	Date	taking office: 1/1/2006
Name:	Name	e:
Title:	Title:	
Address:	Addre	ess:
Data taking office:		Appling office.
Date taking office:		taking office:
B. <u>DIRECTORS</u> PLEASE TYPE OR PRINT CL		
Name:		9:
Address:	Addre	95S:
	· 	
Date taking office:	Date f	taking office:
Name:	Name	o:
Address:		ess:

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

### TRADE WINDS AT TWELVE OAKS

OFFICERS:		<b>ELECTED:</b>
KEVIN REILLY	(PRES)	2/08
KRAY ARNOLD	(TBD)	2/08
ASHESH VORA	(TBD)	2/08
<b>GARRY BINGHAM</b>	(TBD)	2/08

## All addresses are P.O. Box 25466, Tempe, Arizona 85285-5466

<u>DIRECTORS:</u>	ELECTED:
KEVIN REILLY	2/08
KRAY ARNOLD	2/08
ASHESH VORA	2/08
GARRY BINGHAM	2/08

All addresses are P.O. Box 25466, Tempe, Arizona 85285-5466

1/15/2008 2:01 PM

# TRADEWINDS AT TWELVE OAKS BALANCE SHEET AS OF DEC 31, 2007

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**ASSETS** 

CURRENT ASSETS
OPERATING ACCOUNT

7,303.11

RESERVE ACCOUNTS

WAMU RESERVE #0592-A 24,729.35

WAMU RESERVE #2207-8

14,283.14

**DEPOSITS REFUNDABLE** 

680.00

**TOTAL CURRENT ASSETS** 

46,995.60

**TOTAL ASSETS** 

46,995.60

LIABILITIES & CAPITAL

CAPITAL

RETAINED EARNINGS PROFIT /(LOSS) FOR PERIOD 33,781.85 13,213.75

**TOTAL CAPITAL** 

46,995.60

TOTAL LIABILITIES & CAPITAL

46,995.60

<i>f</i> ,			
Please Enter Corporation Name: TRADE WINDS AT TWELVE OAKS OWNE	File number -0197284-6 Page 3		
9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A.9)  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 filling a financial disclosure.			
9A. <u>MEMBERS</u> (A.R.S. § 10-11622.A.6)			
Only Nonprofit Corporations must answer this question.  This corporation	ration DOES X DOES NOT Thave members.		
10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-1622.A.8 & 10-116 Has ANY person serving either by election or appointment as an officer, director, than 10% of the issued and outstanding common shares or 10% of any other probeen: [Underlined portion pertains to business corporations only]	trustee, incorporator and/or person controlling or holding more		
<ol> <li>Convicted of a felony involving a transaction in securities, consumer fraudy year period immediately preceding the execution of this certificate?</li> <li>Convicted of a felony, the essential elements of which consisted of fraud, or monopoly in any state or federal jurisdiction within the seven year period.</li> <li>Or are subject to an injunction, judgment, decree or permanent order of a immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order of a immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order of a immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order of a immediately preceding execution of this certificate.</li> <li>(a) fraud or registration provisions of the securities laws of that jurisdiction; or</li> <li>(b) the consumer fraud laws of that jurisdiction?</li> </ol>	misrepresentation, theft by false pretenses or restraint of trade iod immediately preceding execution of this certificate? any state or federal court entered within the seven year period judgment, decree or permanent order involved the violation of:		
If "YES", the following information <u>must be submitted</u> as an attachm of the actions stated in Items 1. through 3. above.	ient to this report for each person subject to one or more		
<ol> <li>Full birth name.</li> <li>Present home address.</li> <li>Prior addresses (for immediate</li> <li>Social 5</li> <li>The native date</li> </ol>	nd location of birth.  Security Number  Fure and description of each conviction or judicial action;  and location; the court and public agency involved, and  or cause number of the case.		
11. <u>STATEMENT OF BANKRUPTCY, RECEIVERSHIP or CHARTER I</u> 1623 & 10-11623)	REVOCATION (A.R.S. §§10-202.D.2, 10-3202.D.2, 10-		
A) Has the corporation filed a petition for bankruptcy or appointed a receiver?	-		
B) Has any person serving as an officer, director, trustee or incorporator of the over 20% of the issued and outstanding common shares, or 20% of any other corporation which has been placed in bankruptcy, receivership or had its charter or jurisdiction?	er proprietary, beneficial or membership interest in any other		
[Underlined portion pertains to business corporations only]	One box must be marked: YES INO		
If "YES" to A and/or B, the following information must be submitted as statement above.  1. The names and addresses of each corporation and the person or stockholder)  2. The state in which each corporation was a) incorporated b) transacted 3. The dates of corporate operation.  4. If any involved person (listed in #1) has been involved in any other address of each corporation.  5. Date, Case number and Court where the bankruptcy was filed or received.  6. Name and address of court appointed receiver.	persons involved. (e.g. officer, director, trustee or major ed business.  bankruptcy proceeding within the past year, the name and		
12. SIGNATURES: Annual Reports must be signed and dated by at least	st 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 CEVIN P REILLY Date 3-15-08 Name	Date		
Signature Signature			
Title JICK PRESIDENT Title (Signator(s) must be duly authorized corporate officer	(s) listed in section 7 of this report.)		

### Annual Report Instruction Sheet-READ ME! PLEASE FOLLOW THESE DIRECTIONS!

This is the instruction sheet for the annual reporting process for all corporations doing business in Arizona. Every corporation must submit an annual report once a year. This annual report must be correctly filled out and submitted by the assigned due date or the corporation may be administratively dissolved or have its authority revoked by the State of Arizona. This is the only notice you will receive. According to A.R.S. §10-1622.F, penalties accrue on business corporation annual reports which are submitted late (after the due date). Corporations must use the annual report form prescribed by the Corporation Commission. **No other format is allowed.** 

Please verify the business address and statutory agent and agent address information on page one. Strike out incorrect information. Correct information should be legibly written above or to the side of struck, incorrect information. Complete the remainder of the form - use the corporation's original articles of incorporation, amendment documents and corporate minutes as guides for the stock questions. IMPORTANT: The entirety of this document is public record, including addresses cited.\*Use black or blue ink.

	Section 1. All corporations must state their name, address, zip code, domicile state, and type (e.g., nonprofit, business, sole, professional, business trust). Please list a business phone number.
П	Section 2. All corporations must state the name and address of the current Statutory Agent for the corporation. Correct
_	information about the Statutery Agent in vital to the legitimate surfacility and atoms of the agent for the Corporation. Correct
	information about the Statutory Agent is vital to the legitimate authority and status of the corporation. The statutory agent must
	provide both a physical and mailing address. If statutory agent has a P.O. Box, then they must provide a physical description of
	their street address/location. New Statutory Agents must consent to their appointment by signing the appropriate line. A
	corporation must amend their records at the Commission anytime the Statutory Agent is changed or whenever the Agent's
_	designated mailing address changes. Do not sign in the space provided, unless you are appointing a new agent.
u	Section 3. Foreign (out-of-state/country) corporations must state their known place of business in this state and in the
_	jurisdiction in which they are incorporated. List the primary address in Section 1, and the secondary address in Section 3.
ч	Section 4. All corporations must check the category that best describes the character of their corporation in the applicable
	business or nonprofit corporation area.
ч	Section 5. All business corporations must indicate the number of shares which they have authorized and issued, the class and
	series. All business trusts must indicate the number of transferable certificates held by trustees.
	Section 6. All business corporations must indicate the list of applicable shareholders.
	Section 7. Please list all principal officers. All corporations must have at least one duly authorized officer, with address.
	Section 8. Please list all directors. All corporations must have at least one director per A.R.S. §§10-803.A & 10-3803.A.
	Section 9. All Nonprofit corporations must attach a statement of financial condition (e.q. income/expense statement, balance
	sheet including assets, liabilities). All other types of corporations are exempt from filing a financial disclosure. All Nonprofit
	<u>Corporations</u> must also indicate whether or not the corporation has members.
	Section 10. All corporations must check either YES or NO in the Certificate of Disclosure. Those who check the "YES" box
	must supply the attachment required as explained in section 10.
	Section 11. All corporations must check either YES or NO in the Statement of Bankruptcy, Receivership or Charter Revocation
	(both A and B). Those who check the "YES" box must supply the attachment required as explained in section 11.
	Section 12. All corporations must read the declarations in this section. If they have complied, and if they have completed the
	Annual Report, then the applicable officer(s) listed in section 7 must acknowledge by signing and dating the report.
	The signer(s) shall be at least one duly authorized officer.
	Sign, Date & Mail the Check and Annual Report. Business corporations must send \$45, Nonprofit corporations \$10. Credit
	cards are not accepted. Business/profit corporations are subject to penalties if their report is submitted after its assigned due
	date. Contact the Annual Report section at 602-542-3285 (Phoenix) or 520-628-6560 (Tucson) or by FAX at 602-542-0082 for
	the penalty amount due.
:::22	MAKE CHECK PAYABLE TO: ARIZONA CORPORATION COMMISSION
i i i jiş	MAIL OR DELIVER TO: c/o Annual Reports - Corporations Division
K1183	1300 West Washington
::::::::::::::::::::::::::::::::::::::	Phoenix, Arizona 85007-2929

Seek professional advice from your accountant, attorney, or other knowledgeable source if you need help with any section. The Commission's web site (www.azcc.gov/Divisions/Corporations/) has more general information about annual reports and reporting requirements. The Annual Reports Section of the Corporations Division cannot give legal or tax advice, but you may call them with your other questions regarding this form at (602) 542-3285.

AR:0046 Rev. 12/2007 Arizone Corporation Commission Corporations Division