



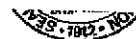
WEB FORM
COPY

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

AZ Corp. Commission



02379357



DUE ON OR BEFORE 04/22/2008

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. -1284555-7

OLIVE AVENUE BUSINESS PARK CONDOMINIUM ASSOCIATION
627 S 48TH ST STE 110
TEMPE, AZ 85281

c/o Victoria Properties

RECEIVED

APR 04 2008

ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

Business Phone: 480-303-16701 (Business phone is optional.)

State of Domicile: ARIZONA

Type of Corporation: NON-PROFIT

2.

Statutory Agent: DONALD E DYCKMAN

Physical Address, if Different.

Mailing Address: %MARISCAL WEEKS MCINTYRE & FRIE

Physical Address:

2901 N CENTRAL AVE STE 200

City, State, Zip:

City, State, Zip: PHOENIX, AZ 85012

ACC USE ONLY

Fee \$

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

- | | |
|---|--|
| <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. Barber/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

- ☐ 1. Charitable
- ☐ 2. Benevolent
- ☐ 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

**REMOVAL AND APPOINTMENT OF DIRECTOR
AND OFFICERS OF OLIVE AVENUE BUSINESS PARK
CONDOMINIUM ASSOCIATION**

The undersigned, as the Declarant under the Condominium Declaration for Olive Avenue Business Park Condominium (the "Declaration"), and pursuant to the right reserved to the Declarant under Section 6.2 of the Declaration, hereby removes John Meyerhoffer as a director and officer of Olive Avenue Business Park Condominium Association (the "Association") and appoints David Howell as the President, Vice President, Secretary and Treasurer of the Association.

Dated this 25th day of October, 2007.

**PEORIA COMMERCE DEVELOPERS,
LLC, an Arizona limited liability company**

By: _____

Its: Manager _____

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)
0 0 N/A		

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)
0 0 N/A		

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 ☒ Name: _____ Name: _____
Name: _____ Name: _____

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

Name: <u>David Howell</u>	Name: _____
Title: <u>PRESIDENT</u>	Title: _____
Address: <u>12002 Miramar Parkway</u> <u>Miramar, FL 33025</u>	Address: _____
Date taking office: <u>10/25/2007</u>	Date taking office: _____
Name: _____	Name: _____
Title: _____	Title: _____
Address: _____	Address: _____
Date taking office: _____	Date taking office: _____

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

Name: <u>David Howell</u>	Name: _____
Address: <u>12002 Miramar Parkway</u> <u>Miramar, FL 33025</u>	Address: _____
Date taking office: <u>10/25/2007</u>	Date taking office: _____
Name: _____	Name: _____
Address: _____	Address: _____
Date taking office: _____	Date taking office: _____

Olive Avenue Business Park Condo Assoc.

Balance Sheet
At December 31, 2007

	-Current Month-	- Prior Month-	- Net Change -
ASSETS			
=====			
CURRENT ASSETS			
Operating Account	\$ (1,845.25)	\$ (441.65)	\$ (1,403.60)
M/M Reserve Account	145,289.79	138,392.93	6,896.86
Accounts Receivable	20,206.10	15,493.46	4,712.64
Deposits / Utility	7,500.00	7,500.00	0.00
	-----	-----	-----
Total Current Assets	\$ 171,150.64	\$ 160,944.74	\$ 10,205.90
OTHER ASSETS			
	-----	-----	-----
	-----	-----	-----
TOTAL ASSETS	\$ 171,150.64	\$ 160,944.74	\$ 10,205.90
=====	=====	=====	=====
CURRENT LIABILITIES			
Prepaid Monthly Assessmnt	1,405.36	1,362.76	(42.60)
	-----	-----	-----
Total Current Liabilities	\$ 1,405.36	\$ 1,362.76	\$ (42.60)
LONG TERM LIABILITIES			
	-----	-----	-----
	-----	-----	-----
Total Liabilities	\$ 1,405.36	\$ 1,362.76	\$ (42.60)
Reserve -Cap. Imprvmnts	140,393.34	133,778.84	(6,614.50)
Current Year Earnings	16,854.05	13,305.25	(3,548.80)
Retained Earnings	12,497.89	12,497.89	0.00
	-----	-----	-----
Total Equity	\$ 169,745.28	\$ 159,581.98	\$ (10,163.30)
	-----	-----	-----
Total Liabilities& Equity	\$ 171,150.64	\$ 160,944.74	\$ (10,205.90)
=====	=====	=====	=====

Olive Avenue Business Park Condo Assoc.

Statement of Operations
For The Month Ended December 31, 2007

	CURRENT PERIOD	YEAR TO DATE
Monthly Assessments	\$ 18,678.84	\$ 181,724.52
Declarant Assessments	1,481.78	44,590.78
Initial Working Capital	496.80	5,006.52
Late Fees	1,550.00	7,700.41
Other Income	200.00	700.00
Reserve M/M Interest	282.36	3,467.79
Total Income	\$ 22,689.78	\$ 243,190.02
RESERVE TRANSFERS		
Transfer (To) Reserve	(1,957.00)	(12,103.84)
Total Reserve Transfers	\$ (1,957.00)	\$ (12,103.84)
OPERATING EXPENSES		
Courier/Freight/Postage	0.00	498.30
Garbage Removal	563.60	5,128.19
Insurance	0.00	24,566.60
Window Washing	965.00	5,575.00
Pest Control	175.00	2,100.00
Parking Lot Sweeping	800.00	12,248.00
Copies	0.00	98.64
Locksmith / Keys	0.00	2,044.87
Prop Maint/Landscaping	7,560.00	39,690.00
Landscaping Other	229.23	6,439.87
Day Porter Services	675.00	8,475.00
Property Management	2,500.00	30,000.00
Accounting/Tax Service	0.00	300.00
Legal	23.00	434.91
Bank Fees	0.00	44.52
R&M - Parking Lot	0.00	4,299.46
R&M - Fire & Safety	976.00	1,732.00
R&M - Other	0.00	228.74
R&M - Plumbing-BackFlow	0.00	1,499.31
Exterior Lights	248.37	6,017.79
Taxes & Licenses	0.00	103.00
Security Fire Alarms	0.00	2,400.00
Electricity	0.00	27,173.63
Telephone	528.15	6,149.35
Water / Sewer	1,940.63	26,984.95
Total Operating Expenses	\$ 17,183.98	\$ 214,232.13

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VICTORIA PROPERTIES

PAGE 03/03

Please Enter Corporation Name: OLIVE AVENUE BUSINESS PARK CONDOMINIUM ASSOCIATION File number -1284556-7 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 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.6 & 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 entrapment 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 entrapment 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 shareholder)
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: DAVID HOWELL Date: _____ Name: _____ Date: _____

Signature: [Signature] Signature: _____

Title: CHAIRMAN - CEO Title: _____

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

