AZ Corp. Commission
02451491

STATE OF ARIZONA CORPORATION COMMISSION

CORPORATION ANNUAL REPORT & CERTIFICATE OF DISCLOSURE

DUE ON OR BEFORE **FILING FEE**

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.

06/07/2008

1. - 1317168-4

RECEIVED
JUN 03 2008
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

EAGLES LANDING HOME OWNERS ASSOCIATION (HOA)
1030 S. BARRELCACTUS RIDGE, LOT #87
BENSON, AZ 85602

Business Phone:_____ (Business phone is optional.)

State of Domicile: **Type of Corporation:**

2. Statutory Agent: ALFONSO SALDO
1030 S. BARRELCACTUS RIDGE #87
BENSON, AZ 85602

Physical Address, If Different.

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

__ 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. Ranching/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. __ 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~~

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.

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)

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.

Name: _____ Name: _____

NONE ☐

Name: _____ Name: _____

7. OFFICERS

Name: ALFONSO SACCO

Title: CORPORATE SECRETARY

Address: 1030 S BARREL CACTUS RDG LOT67
BENSON, AZ 85602

Date taking office: 12/31/2006

Name: _____

Title: _____

Address: _____

Date taking office: _____

Name: LYNNE FLOWER

Title: PRESIDENT

Address: 1030 S BARREL CACTUS RDG LOT54
BENSON, AZ 85602

Date taking office: 12/31/2006

Name: _____

Title: _____

Address: _____

Date taking office: _____

8. DIRECTORS

Name: ARTHUR BALE

Address: 1030 S BARREL CACTUS RDG LOT154
BENSON, AZ 85602

Date taking office: 12/31/2006

Name: ALAN LEWIS

Address: 1030 S BARREL CACTUS RDG LOT95
BENSON, AZ 85602

Date taking office: 12/31/2006

Name: STEVEN BUTLER

Address: 1030 S BARREL CACTUS RDG
BENSON, AZ 85602

Date taking office: 12/31/2006

Name: _____

Address: _____

Date taking office: _____

EAGLES LANDING
HOME OWNERS ASSOCIATION (HOA), INC
@ COCHISE TERRACE
1030 S Barrel Cactus Ridge, Box 308
Benson AZ 85602-6478

May 30, 2008

Linda Fisher, Director
Arizona Corporation Commission
1300 W. Washington St. 1st Floor
Phoenix AZ 85007-2929

Subject: Statement of Financial Condition.

Director Fisher,

As requested by the Corporate Secretary/Director, Al Sacco and as required by state law the following Statement of Financial Condition is provided for the period covering May 1, 2007 to April 30,2008 for the Arizona Corporation Commission annual report.

Total Assets/ Liabilities as of May 1, 2007:
Cash on Hand $1644.94
Liabilities.....None

Income.....$12730.64
Expenses.....$2715.50

Total Assets /Liabilities as of April 30, 2008
Cash on Hand.....$6660.08
Certificate of Deposit.....$5000.00
Total Assets.....$11660.08
Liabilities.....None

Steven R Butler

Steven R Butler, Treasurer

Copy to: Lynn Flowers, President
Al Sacco, Corporate Secretary/Director
Al Lewis, Director
Art Bale, Director/Developer
Colleen Woods, Recording Secretary

Eagles Landing Home Owners Association (HOA), Inc. @ Cochise Terrace
-1317168-4
1030 S. Barrel Cactus Ridge
Lot #67
Benson, AZ 85602

May 31, 2008

Arizona Corporation Commission
c/o Annual Reports – Corporations Division
1300 West Washington
Phoenix, Arizona 85007-2929

Enclosed is our Annual Report for FY07-08 along with our statement of financial condition and our check in the amount of $10.00 filing fee.

If you have any questions or need further information, please do not hesitate to call me at (520) 586-3099.

Sincerely,

Alfonso Sacco
Corporate Secretary

Enclosures:
Annual Report
Financial Statement
Check $10.00

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.8 & 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.
2. Full birth name.
3. Present home address.
4. Prior addresses (for immediate preceding 7 year period).
5. Date and location of birth.
6. Social Security Number
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.

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.

Name ALFONSO SACCO **Date** 5/31/2008 **Name** _____ **Date** _____

Signature Alfonso Sacco **Signature** _____

Title CORPORATE SECRETARY **Title** _____

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