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## WEB FORM COPY

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





DUE	ON	OR	BEFORE	06/07/201	5
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FILING FEE \$10.00

PLEASE READ ALL INSTRUCTIONS. The following information is required by A.R.S. §§10-1622 & 10-11622 for all	l corporations
organized pursuant to Arizona Revised Statutes, Title 10. The Commission's authority to prescribe this form Is A	LR.S. §§ 10-121(A)
& 10-3121(A). YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. Make changes or corrections w	here necessary.
Information for the report should reflect the current status of the corporation.	

-1317168-4

RECEIVED

EAGLES LANDING HOME OWNERS ASSOCIATION (HOA), INC. @COCHISE 1030 S BARREL CACTUS RIDGE LOT 308

MAR 1 2 2015

ARIZONA CORP. COMMISSION SION

Mailing Address: 1030 S BARREL CACTUS BRIDGE Physical Address: LOT 99 City, State, Zip: City, State, Zip: BENSON, AZ 85602  ACC USE ONLY  See \$ enalty \$ enalty \$ einstate\$ Specific \$ Specific \$ Specific \$ Signature of new Statutory Agent  Physical Address: City, State, Zip: City, State, Zip: City, State, Zip:  City, State, Z	<b>Business Phone:</b>	;	(Business phone is optional.)
Mailing Address: LOT 99 City, State, Zip: City, State, Zip: BENSON, AZ 85602  ACC USE ONLY  ee \$ enalty \$ enalty \$ do hereby consent to this appointment until my removal or resignation pursuant to law.  Signature of new Statutory Agent  Signature of new Statutory Agent	State of Domicile	ARIZONA	Type of Corporation: NON-PROFIT
City, State, Zip: BENSON, AZ 85802  ACC USE ONLY  ee \$ enalty \$ enalty \$ do hereby consent to this appointment until my removal or resignation pursuant to law.  City, State, Zip:  City, Sta	Statutory Agent:	JULIE KESSLER	Statutory Agent's Street or Physical Address, If Different.
City, State, Zip: BENSON, AZ 85802  ACC USE ONLY  ee \$ enalty \$ enalty \$ einstate\$  Specific \$ Signature of new Statutory Agent  ACC USE ONLY  If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below. Note that the agent address must be in Arizona do hereby consent to this appointment until my removal or resignation pursuant to law.  Signature of new Statutory Agent	Mailing Address:		•
ACC USE ONLY    If appointing a new statutory agent, the new agent MUST consent to that appointment by signing below. Note that the agent address must be in Arizona do hereby consent to this appointment until my removal or resignation pursuant to law.    Signature of new Statutory Agent   Signat			City, State, Zip:
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do hereby consent to this appointment until my removal or resignation pursuant to law.   Reinstate\$    Expedite \$    Signature of new Statutory Agent	Fee \$		
Expedite \$ Signature of new Statutory Agent	· ·	i abboninien bi aidi:	ning below. Note that the agent address must be in Anzona.
Expedite \$ Signature of new Statutory Agent	Penalty \$	I, (individual) or We, (corpora	ation or limited liability company) having been designated the new Statutory Ag
		I, (individual) or We, (corpora	ation or limited liability company) having been designated the new Statutory Ag
rstua	Reinstate\$	I, (individual) or We, (corpora do hereby consent to this app	ation or limited liability company) having been designated the new Statutory Ag pointment until my removal or resignation pursuant to law.
Resubmits Drieted Name of pay Statutory Agent	Reinstate\$	I, (individual) or We, (corpora do hereby consent to this app	ation or limited liability company) having been designated the new Statutory Ag pointment until my removal or resignation pursuant to law.
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	Penalty \$  Reinstate\$  Expedite \$  Resubmit\$  Secondary Address	I, (individual) or We, (corpora do hereby consent to this app Signatus	ation or limited liability company) having been designated the new Statutory Ag pointment until my removal or resignation pursuant to law.
reign Corporations are REQUIRED	Reinstate\$ Expedite \$ Resubmit\$ secondary Address	I, (individual) or We, (corpora do hereby consent to this app.  Signatur  Printed	ation or limited liability company) having been designated the new Statutory Ag pointment until my removal or resignation pursuant to law. The of new Statutory Agent
to complete this section).	Reinstate\$ Expedite \$ Resubmit\$  Secondary Address preign Corporations are F	I, (individual) or We, (corpora do hereby consent to this app.  Signatur  Printed	ation or limited liability company) having been designated the new Statutory Ag pointment until my removal or resignation pursuant to law. The of new Statutory Agent
to complete this section).	Reinstate\$  Expedite \$  Resubmit\$  secondary Address  reign Corporations are I to complete this sect	I, (individual) or We, (corpora do hereby consent to this app Signatur Printed  REQUIRED ion).	ation or limited liability company) having been designated the new Statutory Agpointment until my removal or resignation pursuant to law.  The of new Statutory Agent  Name of new Statutory Agent
to complete this section).  Theck the one category below which best describes the CHARACTER OF BUSINESS of your corporation.	Reinstate\$  Expedite \$  Resubmit\$  secondary Address  reign Corporations are Into complete this sections the category.	I, (individual) or We, (corpora do hereby consent to this app Signatur Printed  REQUIRED ion).	ation or limited liability company) having been designated the new Statutory Agpointment until my removal or resignation pursuant to law.  The of new Statutory Agent  The CHARACTER OF BUSINESS of your corporation.
to complete this section).	Reinstate\$ Expedite \$ Resubmit\$  secondary Address reign Corporations are I to complete this sect theck the one category BUSINESS CORPORAT  1. Accounting	I, (individual) or We, (corpora do hereby consent to this app Signatur Printed  REQUIRED ion).  y below which best describes TONS	the CHARACTER OF BUSINESS of your corporation.  NON-PROFIT CORPORATIONS  1 Charitable

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<b>BUSINESS CORPORATION</b>	<u>ons</u>	NON-PROFIT CORPORATIONS
☐ 1. Accounting	20. Manufacturing	1. Charitable
2. Advertising	☐ 21. Mining	2. Eenevolent
3. Aerospace	22. News Media	3. Educational
4. Agriculture	23. Pharmaceutical	4. Civic
5. Architecture	<u>厂</u> 24. Publishing/Printing	5. C Political
6. Banking/Finance	25. Ranching/Livestock	6. 🚞 Religious
7. Barbers/Cosmetology	26. Real Estate	7. C Social
8. Construction	27. Restaurant/Bar	8 Literary
9. Contractor		9. <u> </u>
10. Credit/Collection	29. Science/Research	10. <u> </u>
11. Education	☐ 30. Sports/Sporting Events	11 Science/Research
12. Engineering		12. Hospital/Health Care
13. Entertainment	☐ 32. Technology(General)	13 Agricultural
14. General Consulting	☐ 33. Television/Radio	14. Cooperative Marketing Association
15. Health Care	34. Tourism/Convention Services	15 Animal Husbandry
16. Hotel/Motel	35. Transportation	<ol> <li>16. E Homeowner's Association</li> </ol>
17. Import/Export	☐ 36. Utilities	17. E Professional, commercial
18. insurance	37. Veterinary Medicine/Animal Care	industrial or trade association
☐ 19. Legal Services	☐ 38. Other	18 Other

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5. CAPITALIZATION: (For-profit Corporations and Business Trusts are REQUIRED to complete this section.)						
			ate the number of transferable certifi	cates held b	y trustees evidencing their beneficial in	terest in the trust
		-	OR TYPE CLEARLY.			
			corporation's original Articles of Incorporation Classes Authorized	rporation for ass	r the amount of <b>shares authorized</b> . Series Within Class (if a	any)
minu	tes for the	e num	ber of shares issued.	riginal numi	ber of shares has changed. Examine t Series Within Class (if a	
6. SHARE	HOLDER		For-profit Corporations and Business Trumore than 20% of any class of share		UIRED to complete this section.)  y the corporation, or having more than a	a 20% beneficial
interest in					,	
	Nam	e:		_ Nan	ne:	
NONE _		e:		Nan	ne:	
7. OFFICE	RS PL	EAS	E TYPE OR PRINT CLEARLY	. YOU ML	JST LIST AT LEAST ONE.	
Name:	JULIE I	KESS	SLER	Name:	BERNARD SCHULTZ	. <u></u>
Title:	PRESIC	DEN.	Γ	Title:	VICE-PRESIDENT	<del></del>
Address: _	1030 S E	BARI	REL CACTUS RIDGE #99	Address:	1030 S BARREL CACTUS RIDO	GE #135
<u>-</u>	BENSO	N, A	Z 85602		BENSON, AZ 85602	
Date taking	a office:	1/14	/2015	Date taki	ng office: 1/14/2015	
	DENNI:			Name:		<u>.                                    </u>
Titte:	TREAS	URE	R	Title:		
Address:	1030 S E	BARI	REL CACTUS RIDGE #96	Address:		
-	BENSO	N, A	Z 85602			<del></del>
Date taking	a office:	1/14	//2015	Date taki	ng office:	
			SE TYPE OR PRINT CLEARL			
			TERSON		SANDRA ELIASON	
-			REL CACTUS RIDGE	'	1030 S BARREL CACTUS RIL	OGE # 124
_	#153			, 133, 000.		<del></del>
-		N, A	Z 85602		BENSON, AZ 85602	<del></del>
Date taking	n office:	2/12	2/2014	Date taki	ng office:	
Name:				Name:		
_				'		
Address: _				Addiess.		rd-rhalmid-rasson-1984s
-						<del></del>
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Date taking office: \_

Date taking office:

Plea	se Enter Corporation Name: EAGLES LANDING HOME OWNERS	ASSOCIATION (F	HOA), INC. @COCHISE File number1317168-4 Page 3
Non bala Coo	INANCIAL DISCLOSURE (A.R.S. §10-11622(A)(9)) profits – if your annual report is due on or before September 25, nce sheet including assets, liabilities). If your nonprofit annual reportive marketing associations must in all cases submit a ficial statement no matter what date the annual report was due.	eport is due a	fter September 25, 2008, a financial statement is not required.
	Y NONPROFIT CORPORATIONS MUST ANSWER THIS QUI MEMBERS (A.R.S. §10-11622(A)(6))		ration DOES DOES NOT D have members.
	ERTIFICATE OF DISCLOSURE (A.R.S. §§ 10-202(D), 10-32. Has any person who is currently an officer, director, trustee, inc. 10% of the issued and outstanding common shares or 10% of been:		22(A)(8) & 10-11622(A)(7)) who, in a For-profit corporation, controls or holds more than
1. 2. 3.	Convicted of a felony involving a transaction in securities, consuperiod immediately preceding the execution of this certificate? Convicted of a felony, the essential elements of which consiste monopoly in any state or federal jurisdiction within the seven yesubject to an injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution of this certificate where such injunction, judgment, decree or permanent order preceding execution or this certificate where such injunction is such as a such	ed of fraud, mister period immore of any state or udgment, dec f that jurisdiction?	srepresentation, theft by false pretenses or restraint of trade or nediately preceding execution of this certificate? r federal court entered within the seven year period immediately ree or permanent order involved the violation of: on, or
	•	<u>On</u>	e box must be marked: YES II NO II
	<ul> <li>If "YES" to A, the following information must be submitted actions stated in Items 1 through 3 above.</li> <li>Full birth name.</li> <li>Full present name and prior names used.</li> <li>Present home address.</li> <li>All prior addresses for immediately preceding 7 year period.</li> </ul>	5. 6.	ment to this report for each person subject to one or more of the Date and location of birth.  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.
В.	Has any person who is currently an officer, director, trustee, income the issued and outstanding common shares, or 20% of any of in any such capacity or held a 20% interest in any other corporate statement above.  (a) Name and address of each corporation and the person (b) State(s) in which it: (i) was incorporated and (ii) transcript (c) Dates of corporate operation.	ther proprietar ration on the to On the One the One the One One the One One One One One One One One One On	y, beneficial or membership interest in the corporation, served bankruptcy or receivership of that other corporation?  ne box must be marked: YES II NO A chiment to this report for each corporation subject to the
11. 5	STATEMENT OF BANKRUPTCY OR RECEIVERSHIP (A.R.S.	. §§ 10-1623	& 10-11623)
A.	board of directors and major stockholders of such corpo	d as an attach the corporation poration, the stockhold	ment to this report:
	bankruptcy or receivership of the other corporation. If so, (a) Name and address of each corporation;		
	(c) Dates of operation.	· · · · · · · · · · · · · · · · · · ·	
l de	SIGNATURES: Annual Reports must be signed and da clare, under penalty of perjury, that all corporate income tax I with the Arizona Department of Revenue. I further declare ifficate, including any attachments, and to the best of my (or content of the best of	returns requ under pena	ity of perjury that I (we) have examined this report and the
	- · ·		Date
	/ / 6/1-0	Signature_	
_		Title	
	Treasurer (Signator(s) must be duly authorized corp	porate officer	(s) listed in section 7 of this report.)