STATE OF ARIZONA CORPORATION COMMISSION



CORPORATION ANNUAL REPORT



A CERTIFICATE OF DISCLOSURE FILING FEE: S DUE ON OR BEFORE:06/06/2020 PLEASE READ ALL INSTRUCTIONS. 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 carporation. File # 12471139

GREENWAY PROFESSIONAL PARK CONDOMINIUM ASSOCIATION

AIR VICTORIA PROPERTIES MANAGEMENT LLC, 627 \$ 48TH STREET STE 110, TEMPE, AZ 85281 Business Email Address: Type of Corporation: Domestic Nosprofit Corp Statutory Agent name and address (MUST both be in Arizona): KEN MATHESON Street or physical address: 427 S 48TH ST STE 110, TEMPE, AZ 85281 Mailing (if different than street): 2.1 If appointing a new statutory agent, the new agent MUST consent to the appointment by signing below: 1. (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. Principal Office Address (street address required; foreign corporation 4. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

NON-PROSECT CORPORATIONS

NON-PROSECT CORPORATIONS 1 _ Charatele 4 _ Creis 25. Rending Liver 36 Real Estate 10. Credit Collect 11. Education 14. General Compliant 34. Other ___ 19. Legal Service S. CAPITALIZATION (For-profit corporations and Business Trusts are <u>REQUIRED</u> to complete this section)

Business trusts must indicate the number of transferable certificates held by trustoes evidencing their baneficial interest in the trust estate 5.1. Authorized shares/certificates: find the number of authorized shares in the corporation's original Articles of Incorporation.

Number of Shares/Certificates Authorized Class Series Within Class (if any)

Issued shares/certificates: examine the corporation's mi		
lumber of Shares/Certificates Issued	Class	Series Within Class (if any)
6. SHAREHOLDERS (For-profit corporations and Busin	ness Trusts are <u>REOUIRED</u> to complete this	section)
List shareholders holding more than 20% of any class of sh	nares issued by the corporation, or having more t	han a 20% beneficial interest in the corporation. Name:
None	Name:	Name:
OFFICERS (both name and address required);		
William R. Johns	E 141, PHOENIX, AZ, 85032, USA Dage (of Taking Office: 10050000- 11/6/19
L <u>DIRECTORS (both name and address required):</u> Director: FRANCES LOPEZ - 6021 E SONORAN TRAIL Director: TROY OF HAUSEN _ 15745 N 40TH ST STE		
		or rading Office. Tortorzora
Director: FRANCES LOPEZ - 6021 E SONORAN TRAI		or rading Office. Tortortore
Director: FRANCES LOPEZ - 6021 E SONORAN TRAI		or rading Office: Toreurzura
Director: FRANCES LOPEZ - 6021 E SONORAN TRAI	117, PHOENIX, AZ, \$5032, USA Date of 1	Taking Office: MAGAGALE 11/0/19
Director: FRANCES LOPEZ - 6021 E SONORAN TRAIL Director: TROY OLHAUSEN - 15255 N 40TH ST STE II 9. <u>FINANCIAL DISCLOSURE</u> (A.R.S. §10-2019) C 10. ONLY NONPROFIT CORPORATIONS MUST	17, PHOENIX, AZ, \$5032, USA Date of T	Taking Office: 10/26/2018 - 11/9 9
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he bex must be marked; YES ONO	
If "YES" to A, the following information m	used be authentited as an attachment to this report for each person subject to one or more of the actions stated in hems I through 3 above
1. Full birth name.	
2. Full present name and prior names used	4
3. Present home address.	
4. All prior addresses for insmediately pre-	coding 7 year period.
5. Date and location of birth.	
6. The nature and description of each convic	ction or judicial action; the date and location, the court and public agency involved; and the file or cause number of the case.
B. Has any person who is currently an off common shares, or 20% of any other proprie the bankruptcy or receivership of that other of	ficer, director, trussee, incorporator, or who, in a For-profit corporation, controls or holds over 20% of the issued and outstanding stary, baseficial or memberahip interest in the corporation, served in any such capacity or held a 20% interest in any other corporation on corporation?
One bex must be marked: YES ONO	
If "YES" to B, the following information p	must be submitted as an attachment to this report for each corporation subject to the statement above.
(a) Name and address of each corporation a	and the persons involved.
(b) State(s) in which it: (i) was incorporated	d and (ii) transacted business.
(c) Dates of corporate operation.	
	FCFTVFRSHIP (A.R.S. 86 10-1623 & 10-11623)
A. Has the <u>corporation</u> filed a petition for	bunkruptcy or appointed a receiver? One less must be marked: YES NO M
If "Yes" to A, the following information m	ust be submitted as an attachment to this report
a corporation, the statement shall list the o	sockholders of the corporation within one year of filing the position for bankruptcy or the appointment of a receiver. If a major stockholder current president, chairman of the board of directors and major stockholders of such corporate stockholder. "Major stockholder" means a per cent of the issued and outstanding shares or twenty per cent of any proprietary, beneficial or membership interest in the corporation
2. Whether any such person has been an officer orporation. If so, for each such corporation	icer, director, trustee or major stockholder of any other corporation within one year of the bankruptcy or receivership of the other in give:
(a) Name and address of each corpora	asion,
(b) States in which it: (i) was incorpor	rated and (ii) transacted business.
(c) Dates of operation.	
13. SIGNATURES:	
Department of Revenue. I/we further de best of my/our knowledge and betief the William r jo Printed Name	
william r jolinsen	
Signature William r Jounson Signature President	4/6/2020
	Date Title Date