PERSONAL FI	NANCIAL STATEMENT	FORM PFS COVER SHEET
For filings required in 20	dance with chapter 572 of the Government Code.  013, covering calendar year ending December 31, <b>2012</b> .  INSTRUCTION GUIDE when completing this form.	PAGE # Page 1 of 49  ACCOUNT # 00019837
1 NAME	TITLE, FIRST, MI	OFFICE USE ONLY
	Sen. John	Date Receive AND DELIVERED
	NICKNAME, LAST, SUFFIX	RECEIVED
	Carona Sr,	APR 3 0 2013 7112
2 ADDRESS	5404 N O - 4 - 1 5 0 7 - 000	Texas Ethics Commission
	5401 N Central Expwy, Suite 300 Dallas, TX 75205	Receipt #
		HD)/PM 4//30//3 Amount
	(CHECK IF FILER'S HOME ADDRESS)	PROCESSED APR 3 0 2013
3 TELEPHONE NUMBER	AREA CODE NUMBER; EXTENSION	Date Imaged
NONDER	(214) 303-5510	
4 REASON FOR FILING	☐ CANDIDATE	(INDICATE OFFICE)
STATEMENT		
		(INDICATE OFFICE)
	APPOINTED OFFICER	(INDICATE AGENCY)
- 1	EXECUTIVE HEAD	(INDICATE AGENCY)
	☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT	
	☐ STATE PARTY CHAIR	(INDICATE PARTY)
	OTHER:	(INDICATE POSITION)
spouse or dependent ch	financial activity you are reporting (filer must report information abou ildren if the filer had actual control over that activity):	t the financial activity of the filer's
SPOUSE		
DEPENDENT CHILD 1.		
2.		
3,		
	rill disclose your financial activity during the calendar year. In parts 1 your own financial activity, but also that of your spouse or a dependactivity.	
49	COPY AND ATTACH ADDITIONAL PAGES AS NECE	SSARY 2571510

TX-PFS Software Version 1.1.0

1-800-325-8506

Austin, Texas 78711-2070

SOURCES OF OCC	UPATIONAL II	NCOME	PART 1A
☐ NOT APPLICABLE			
When reporting information abou providing the number under which	t a dependent child's a h the child is listed on t	ctivity, indicate the child he Cover Sheet.	about whom you are reporting by
1 INFORMATION RELATES TO	☑ FILER	☐ SPOUSE	DEPENDENT CHILD
<sup>2</sup> EMPLOYMENT	N		MPLOYER / POSITION HELD 's Home Address)
X EMPLOYED BY ANOTHER	Associations, Inc.	[] (Olleck ii i iiiei	5 Home Addioss/
	5401 N Central Exp Dallas, TX 75205	owy, Suite 300	
	President & CEO		
OF SELECTION OF SELECTION		NATURE OF	OCCUPATION
SELF-EMPLOYED	Business Executive		
INFORMATION RELATES TO	X FILER	☐ SPOUSE	DEPENDENT CHILD
EMPLOYMENT	4	_	EMPLOYER / POSITION HELD
X EMPLOYED BY ANOTHER	Texas Senate	(Check if Filer	r's Home Address)
	PO Box 12068 Austin, TX 78711		
	State Senator		
		NATURE OF	OCCUPATION
SELF-EMPLOYED	Legislator		
INFORMATION RELATES TO	☑ FILER	☐ SPOUSE	DEPENDENT CHILD
EMPLOYMENT	1		EMPLOYER / POSITION HELD
M EMPLOYED BY ANOTHER	First Associations E	_ `	r's Home Address)
	12011 N Central Ex Dallas, TX 75243		
	Director		
<u></u>		NATURE OF	OCCUPATION
SELF-EMPLOYED	Board Member		

exas Ethics Commission P.O. Bo	12070 Austin, Texas 7	8711-2070	(512)463-	5800 1-800-325-85	
STOCK				PART 2	
☐ NOT APPLICABLE					
List each business entity in which y and indicate the category of the nu category of the amount of the net of INSTRUCTION GUIDE.  When reporting information about a providing the number under which	nber of shares held or acc ain or loss realized from the dependent child's activity	quired. If some or al ne sale. For more in r, indicate the child a	l of the stock was solo formation, see FORM	d, also indicate the I PFS	
BUSINESS ENTITY	Associations, Inc.		ME		
2 STOCK HELD OR ACQUIRED	BY X FILER	SPOUSE	DEPENDENT CHIL	D	
NUMBER OF SHARES	LESS THAN 100	☐ 100 TO 499 ☒ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999	
F SOLD NET GAII		\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE	
BUSINESS ENTITY	First Associations Ban	NAME First Associations Bank			
STOCK HELD OR ACQUIRED	Y X FILER	SPOUSE	DEPENDENT CHIL	D	
NUMBER OF SHARES	☐ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499 ☒ 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999	
IF SOLD NET GAII	I I I ESS THAN \$5 000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE	

INCOME FROM INT	EREST, DIVIDEN	IDS, ROYAL	TIES & RENTS PART 5		
List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFSINSTRUCTION GUIDE.					
When reporting information about providing the number under which	ut a dependent child's activity ch the child is listed on the C	y, indicate the child a over Sheet.	about whom you are reporting by		
<sup>1</sup> SOURCE OF INCOME	First Associations Bank	NAME AND AD	DRESS		
	12011 N Central Expwy, Su Dallas, TX 75243	ite 1165			
<sup>2</sup> RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
<sup>3</sup> AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE		
SOURCE OF INCOME		NAME AND AD	DRESS		
	5401 N Central Expwy, LP				
	5401 N Central Expwy, Suit Dallas, TX 75205	e 300			
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	<b>5</b> 500 - <b>\$4</b> ,999	\$5,000 - \$9,999	☐ \$10,000 - \$24,999 🔀 \$25,000OR MORE		
SOURCE OF INCOME		NAME AND AD	DRESS		
	Preston and Melinda Patters	son			
	1825 Briargate Lane Mesquite, TX 75181				
RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD		
AMOUNT	<b>\$500 - \$4,999</b>	<b>X</b> \$5,000 - \$9,999	\$10,000 - \$24,999 \$25,000OR MORE		
	ADV AND ATTACH ADDITI	ONAL DACES AS	NECESSARY		

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512)463-5800	1-800-325-8506

INCOME FROM INT	EREST, DIVIDEN	IDS, ROYAL	TIES & RENTS	PART 5		
List each source of income you, interest, dividends, royalties and more information, see FORM PF	rents during the calendar y					
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.						
<sup>1</sup> SOURCE OF INCOME	JJC Holdings, LLC 5401 N Central Expwy Suite 300 Dallas, TX 75205	NAME AND AD	DRESS			
<sup>2</sup> RECEIVED BY	X FILER	SPOUSE	DEPENDENT CHILD	_		
<sup>3</sup> AMOUNT	<b>\$500 - \$4,999</b>	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$2	5,000OR MORE		
		d.				
CO	PY AND ATTACH ADDIT	<b>TONAL PAGES AS</b>	NECESSARY			

1-800-325-8506

P.O. Box 12070

# PERSONAL NOTES AND LEASE AGREEMENTS PART 6 ■ NOT APPLICABLE Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> PERSON OR INSTITUTION Bank of America HOLDING NOTE OR LEASE AGREEMENT <sup>2</sup> LIABILITY OF X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ <sup>3</sup> GUARANTOR <sup>4</sup> AMOUNT \$1,000 - \$4,999 \$5,000 - \$9,999 \$10,000 - \$24,999 \$\times\$ \$25,000--OR MORE PERSON OR INSTITUTION **HC Processing** HOLDING NOTE OR LEASE AGREEMENT LIABILITY OF X FILER DEPENDENT CHILD \_\_\_\_ ☐ SPOUSE **GUARANTOR AMOUNT \$1,000 - \$4,999** PERSON OR INSTITUTION Carona, Deborah **HOLDING NOTE OR** LEASE AGREEMENT LIABILITY OF X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ **GUARANTOR AMOUNT** \$5,000 - \$9,999 \$10,000 - \$24,999 \$\tilde{X}\$ \$25,000--OR MORE \$1,000 - \$4,999

PERSONAL NOTES AND LEASE AGREEMENTS PART 6							
☐ NOT APPLICABLE	□ NOT APPLICABLE						
Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFSINSTRUCTION GUIDE  When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.							
<sup>1</sup> PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Nationstar Mortgage						
<sup>2</sup> LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD				
<sup>3</sup> GUARANTOR							
<sup>4</sup> AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE				
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Kornye, Maryanne						
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD				
GUARANTOR							
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE				
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Keller, Wilma						
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD				
GUARANTOR							
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	□ \$10,000 - \$24,999 🗵 \$25,000OR MORE				
COPY	AND ATTACH ADDIT	ONAL PAGES AS	NECESSARY				

PERSONAL NOTES A	AND LEASE AG	REEMENTS		PART 6		
□ NOT APPLICABLE						
Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFSINSTRUCTION GUIDE  When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.						
<sup>1</sup> PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Texas Independent Bank					
<sup>2</sup> LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD	_		
<sup>3</sup> GUARANTOR						
<sup>4</sup> AMOUNT	<b>\$1,000 - \$4,999</b>	\$5,000 - \$9,999	\$10,000 - \$2 <b>4</b> ,999 <b>X</b> \$2	5,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Collectors Capital					
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD	_		
GUARANTOR						
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 🗶 \$25	5,000OR MORE		
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Texas Capital Bank					
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD	=0:		
GUARANTOR						
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25	5,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY						

PERSONAL NOTES	AND LEASE AG	REEMENTS	PART 6				
□ NOT APPLICABLE							
Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFSINSTRUCTION GUIDE  When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.							
<sup>1</sup> PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Lexus Financial Services	Lexus Financial Services					
<sup>2</sup> LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD				
<sup>3</sup> GUARANTOR							
<sup>4</sup> AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE				
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Ally Auto Finance						
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD				
GUARANTOR							
AMOUNT	<b>\$1,000 - \$4,999</b>	\$5,000 - \$9,999	\$10,000 - \$24,999 <b>X</b> \$25,000OR MORE				
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	American National Bank						
LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILD				
GUARANTOR							
AMOUNT	<b>\$1,000 - \$4,999</b>	\$5,000 - \$9,999	\$10,000 - \$24,999 X \$25,000OR MORE				
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY							

PERSONAL NOTES A	AND LEASE AG	REEMENTS		PART 6
☐ NOT APPLICABLE				
Identify each guarantor of a loan and a dependent child had a total finance agreement at any time during the cation, see FORM PFSINSTRUCTION When reporting information about a providing the number under which the second seco	cial liability of more than s alendar year and indicate DN GUIDE I dependent child's activit	\$1,000 in the form of the category of the a sy, indicate the child a	a personal note or note amount of the liability.	For more informa-
<sup>1</sup> PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	MBFS			
<sup>2</sup> LIABILITY OF	X FILER	SPOUSE	DEPENDENT CHILL	·
<sup>3</sup> GUARANTOR				
<sup>4</sup> AMOUNT	<b>\$1,000 - \$4,999</b>	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
COP	Y AND ATTACH ADDIT	TIONAL PAGES AS	NECESSARY	

#### Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 PART 7A INTERESTS IN REAL PROPERTY □ NOT APPLICABLE Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> HELD OR ACQUIRED BY X FILER ☐ SPOUSE DEPENDENT CHILD STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE <sup>2</sup> STREET ADDRESS 5131 DeLoache Ave Dallas, TX 75220 NOT AVAILABLE Dallas X CHECK IF FILER'S HOME ADDRESS NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 3 DESCRIPTION LOTS single family home **ACRES** <sup>4</sup> NAMES OF PERSONS Bank of America RETAINING AN INTEREST Nationstar Mortgage NOT APPLICABLE (SEVERED MINERAL INTEREST) <sup>5</sup> IF SOLD ■ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ■ NET LOSS HELD OR ACQUIRED BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD STREET ADDRESS, INCLUDING CITY, COUNTY AND STATE STREET ADDRESS 1825 Briargate Lane Mesquite, TX 75181 NOT AVAILABLE Dallas CHECK IF FILER'S HOME ADDRESS NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED DESCRIPTION LOTS single family home ACRES NAMES OF PERSONS **RETAINING AN INTEREST** NOT APPLICABLE (SEVERED MINERAL INTEREST)

#### IF SOLD

☐ NET GAIN ☐ LESS THAN \$5,000 ☐ NET LOSS

\$5,000 - \$9,999

\$10,000 - \$24,999

\$25,000--OR MORE

#### PART 7B **INTERESTS IN BUSINESS ENTITIES** ■ NOT APPLICABLE Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of 'beneficial interest' and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> HELD OR ACQUIRED BY X FILER ☐ DEPENDENT CHILD SPOUSE NAME AND ADDRESS <sup>2</sup> DESCRIPTION (check if Filer's Home Address) Associations, Inc. 5401 N Central Expwy, Suite 300 Dallas, TX 75205 <sup>3</sup> IF SOLD ■ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE ☐ NET LOSS HELD OR ACQUIRED BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_ NAME AND ADDRESS **DESCRIPTION** (check if Filer's Home Address) 5401 N Central Expwv. LP 5401 N Central Expwy, Suite 300 Dallas, TX 75205 IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET LOSS HELD OR ACQUIRED BY ☐ DEPENDENT CHILD \_\_\_ X FILER ☐ SPOUSE NAME AND ADDRESS DESCRIPTION (check if Filer's Home Address) First Associations Bank 12001 N Central Expwy, Suite 1165 Dallas, TX 75243 IF SOLD ■ NET GAIN ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE ■ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission P.O.	Box 12070 Austin, Texas 7	/8711-2070 <u> </u>	(512)463-5800	1-800-325-8506
INTERESTS IN BUS	SINESS ENTITIES			PART 7B
☐ NOT APPLICABLE				
Describe all beneficial interests calendar year. If the interest wa For an explanation of beneficial INSTRUCTION GUIDE	is sold, also indicate the cate	gory of the amount of	of the net gain or loss realize	d from the sale.
When reporting information about providing the number under which	ut a dependent child's activity ch the child is listed on the Co	r, indicate the child a over Sheet.	about whom you are reportin	g by
<sup>1</sup> HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	-
<sup>2</sup> DESCRIPTION		NAME AND (check if Filer's	ADDRESS B Home Address)	
	JJC Holdings, LLC			
	5401 N Central Expwy Suite 300 Dallas, TX 75205			
3 IF SOLD  NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999 \$2	5,000OR MORE
HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
DESCRIPTION		NAME AND (check if Filer's	ADDRESS Home Address)	
	Carona Ranches, LLC			
	5401 N Central Expwy Suite 300 Dallas, TX 75205			

IF SOLD

■ NET GAIN

■ NET LOSS

☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 ☐ \$25,000--OR MORE

# ASSETS OF BUSINESS ASSOCIATIONS PART 11A ■ NOT APPLICABLE Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS (Check if Filer's Home Address) <sup>1</sup> BUSINESS Associations, Inc. **ASSOCIATION** 5401 N Central Expwy, Suite 300 Dallas, TX 75205 <sup>2</sup> BUSINESS TYPE Corporation <sup>3</sup> HELD, ACQUIRED, X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_ OR SOLD BY DESCRIPTION CATEGORY 4 ASSETS Cash ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 X \$25,000--OR MORE **\$10,000 - \$24,999** Accounts Receivable and Other Receivables LESS THAN \$5,000 \$5,000 - \$9,999 X \$25,000--OR MORE **\$10,000 - \$24,999** Property and Equipment ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 X \$25,000--OR MORE **\$10,000 - \$24,999** Other Assets LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000--OR MORE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# PART 11A ASSETS OF BUSINESS ASSOCIATIONS ■ NOT APPLICABLE Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS (Check if Filer's Home Address) **BUSINESS** 5401 N Central Expwy, LP ASSOCIATION 5401 N Central Expwy Suite 300 Dallas, TX 75205 <sup>2</sup> BUSINESS TYPE partnership <sup>3</sup> HELD, ACQUIRED, DEPENDENT CHILD \_\_\_\_\_ X FILER SPOUSE OR SOLD BY CATEGORY DESCRIPTION 4 ASSETS Cash LESS THAN \$5,000 \$5,000 - \$9,999 ☐ \$10,000 - \$24,999 🔀 \$25,000--OR MORE Real Estate LESS THAN \$5,000 T \$5,000 - \$9,999 X \$25,000--OR MORE \$10,000 - \$24,999 Accounts Receivable and Other Receivables ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ■ \$10,000 - \$24,999 ■ \$25,000--OR MORE Furnishings and Equipment LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000--OR MORE

ASSETS OF B	USINESS ASSC	CIATI	ONS			PART 11A
☐ NOT APPLICABLE						
corporation, professional dent child held, acquired of the assets. For more When reporting informations	ach coporation, firm, partneral association, joint ventured, or sold 50 percent or moinformation, see FORM Ption about a dependent ch	e, or other ore of the o PFSINST ild's activit	business associ outstanding own RUCTION GUID by, indicate the c	iation ir ership a DE.	which you, your spot and indicate the categ	use, or a depen- ory of the amount
<sup>1</sup> BUSINESS ASSOCIATION	JJC Holdings, LLC	NAME /	AND ADDRESS	☐ (C	heck if Filer's Home Address)	
	5401 N Central Expwy Suite 300 Dallas, TX 75205					
<sup>2</sup> BUSINESS TYPE	limited liability corporation	1				
<sup>3</sup> HELD, ACQUIRED, OR SOLD BY	X FILER		SPOUSE		DEPENDENT CHILD	
4 ASSETS	Cash	SCRIPTION				EGORY
				i	☐ LESS THAN \$5,000 ☐ \$10,000 - \$24,999	\$5,000 - \$9,999 \$25,000OR MORE
	Real Estate	16/13/1/2 12 12 12	i ni mining in in in in in	·	* * * * * * * * * * * *	
	Treal Estate			i	LESS THAN \$5,000	\$5,000 - \$9,999
				j	\$10,000 - \$24,999	X \$25,000OR MORE
	Property and Equipment				LESS THAN \$5,000	\$5,000 - \$9,999
				i	\$10,000 - \$24,999	X \$25,000OR MORE
				0 00000		

ASSETS OF B	USINESS ASSOCIATIONS			PART 11A			
☐ NOT APPLICABLE	□ NOT APPLICABLE						
corporation, professional dent child held, acquired of the assets. For more When reporting informat	Describe all assets of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFSINSTRUCTION GUIDE.  When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.						
<sup>1</sup> BUSINESS ASSOCIATION	NAME AND ADDRES Carona Ranches, LLC	ss 🔲	(Check if Filer's Home Address)				
	5401 N Central Expwy Suite 300 Dallas, TX 75205						
<sup>2</sup> BUSINESS TYPE	limited liability corporation		11 -				
<sup>3</sup> HELD, ACQUIRED, OR SOLD BY	X FILER ☐ SPC	OUSE	☐ DEPENDENT CHILD				
<sup>4</sup> ASSETS	DESCRIPTION Cash		i _	EGORY			
			LESS THAN \$5,000	\$5,000 - \$9,999 \$25,000OR MORE			
	Real Estate		LESS THAN \$5,000	\$5,000 - \$9,999 X \$25,000OR MORE			
	Furnishings and Equipment		 	\$5,000 - \$9,999 X \$25,000OR MORE			
	Livestock	et an extractor to te	LESS THAN \$5,000	\$5,000 - \$9,999 X \$25,000OR MORE			

LIABILITIES OF BUSINESS ASSOCIATIONS PART 1							
□ NOT APPLICABLE							
Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFSINSTRUCTION GUIDE.  When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.							
1 BUSINESS ASSOCIATION	NAME AND AE Associations, Inc. 5401 N Central Expwy, Suite 300 Dallas, TX 75205	DDRESS (	Check if Filer's Home Address)				
<sup>2</sup> BUSINESS TYPE	Corporation						
<sup>3</sup> HELD, ACQUIRED, OR SOLD BY	☑ FILER □	SPOUSE	☐ DEPENDENT CHILD	_			
<sup>4</sup> LIABILITIES	DESCRIPTION Accounts Payable	2 B 2 C 2 MARS.	CATE LESS THAN \$5,000 \$10,000 - \$24,999	EGORY			
	Wages and Benefits Payable		LESS THAN \$5,000	\$5,000 - \$9,999 X \$25,000OR MORE			
	Taxes Payable		LESS THAN \$5,000	\$5,000 - \$9,999  \$25,000OR MORE			
	Notes Payable		LESS THAN \$5,000	\$5,000 - \$9,999 \$25,000OR MORE			
		4 V H H B B B B B B B B B B B B B B B B B		economic of the following fig. 2005 (d. 2			
	COPY AND ATTACH ADDITIONA	L PAGES AS I	NECESSARY				

# PART 11B LIABILITIES OF BUSINESS ASSOCIATIONS □ NOT APPLICABLE Describe all liabilities of each coporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME AND ADDRESS (Check if Filer's Home Address) **BUSINESS** 5401 N Central Expwy, LP **ASSOCIATION** 5401 N Central Expwy Suite 300 Dallas, TX 75205 <sup>2</sup> BUSINESS TYPE partnership 3 HELD, ACQUIRED, X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ OR SOLD BY CATEGORY DESCRIPTION 4 LIABILITIES Accounts Payable ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 \$25,000--OR MORE X \$10,000 - \$24,999 Notes Payable ☐ LESS THAN \$5,000 ☐ \$5,000 - \$9,999 ■ \$10,000 - \$24,999 ■ \$25,000--OR MORE

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 78	711-2070	(512)463-5800	1-800-325-8506
LIABILITIES O	F BUSINESS	ASSOCIA	TIONS	47.0	PART 11B
☐ NOT APPLICABLE					
corporation, professional dent child held, acquired of the liabilities. For mor	I association, joint ven I, or sold 50 percent or re information, see FO ion about a dependent	ture, or other but more of the out RM PFSINSTI child's activity,	siness association standing ownersladder SUCTION GUIDE indicate the child	limited liability partnership, pon in which you, your spous hip and indicate the categore.  I about whom you are repor	e, or a depen- ry of the amount
1 BUSINESS ASSOCIATION	JJC Holdings, Inc. 5401 N Central Expwy		D ADDRESS	(Check if Filer's Home Address)	
	Suite 300 Dallas, TX 75205				
<sup>2</sup> BUSINESS TYPE	limited liaiblity corpora	tion			
<sup>3</sup> HELD, ACQUIRED, OR SOLD BY	X FILE	ER .	SPOUSE	DEPENDENT CHILD	
4 LIABILITIES	Accounts Payable	DESCRIPTION		CATEG	
			********		
	Notes Payable			LESS THAN \$5,000 [	\$5,000 - \$9,999
				1 \$10,000 - \$24,999	X \$25,000OR MORE

Texas Ethics Commission	P.O. Box 12070	Austin, Texas 7	3711-2070	(512)463-580	00 1-80	0-325-850
LIABILITIES O				(012)-00-000	PART	
□ NOT APPLICABLE		AGGGGIA	ATIONO			
corporation, professiona dent child held, acquired of the liabilities. For more	I association, joint ven I, or sold 50 percent or re information, see FO ion about a dependen	ture, or other b more of the ou RM PFSINST t child's activity	usiness association Itstanding ownersh RUCTION GUIDE , indicate the child	mited liability partnership, n in which you, your spou ip and indicate the catego about whom you are repo	se, or a depe ory of the am	n-
1 BUSINESS ASSOCIATION	Carona Ranches, LLC		D ADDRESS	(Check if Filer's Home Address)		
	5401 N Central Expwy Suite 300 Dallas, TX 75205	/				
<sup>2</sup> BUSINESS TYPE	limited liability corpora	ition				
<sup>3</sup> HELD, ACQUIRED, OR SOLD BY	X FIL	ER	SPOUSE	DEPENDENT CHILD		_
4 LIABILITIES	Accounts Payable	DESCRIPTION		CATE	GORY	
					\$5,000 - \$9	
				X \$10,000 - \$24,999	\$25,0000	OR MORE
	Notes Payable			LESS THAN \$5,000	<b>\$5,000 - \$9</b>	999
				1 \$10,000 - \$24,999	X \$25,000C	
1	L				20 2002002 ((2 12 12)	n 5 1/2000

<b>BOARDS AND EXE</b>	<b>CUTIVE POSIT</b>	IONS		PART 12			
☐ NOT APPLICABLE							
List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFSINSTRUCTION GUIDE.							
	When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.						
<sup>1</sup> ORGANIZATION	411HOA, Inc. dba Manag	ement Resource Cente	er				
<sup>2</sup> POSTITION HELD	Director						
<sup>3</sup> POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_			
ORGANIZATION	5401 N Central Expressw	vay, LP					
POSTITION HELD	Manager						
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_			
ORGANIZATION	Advanced Technology G	roup, Inc.					
POSTITION HELD	Director						
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_			
ORGANIZATION	Alliance Association Man	agement, Inc					
POSTITION HELD	Director						
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	-			
ORGANIZATION	American Oak Managem	ent, Inc.					
POSTITION HELD	Director						
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY							

1-800-325-8506

## BOARDS AND EXECUTIVE POSITIONS ☐ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Amtek Engineering Services, L.L.C. <sup>1</sup> ORGANIZATION <sup>2</sup> POSTITION HELD Manager <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Antares Property Services, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ Arch Enterprises, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE ☐ DEPENDENT CHILD Associa Abstract Services, Inc. **ORGANIZATION POSTITION HELD** Director POSITION HELD BY X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ Associa Advantage, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

### PART 12

1-800-325-8506

## BOARDS AND EXECUTIVE POSITIONS ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Associa Capital, LLC <sup>1</sup> ORGANIZATION <sup>2</sup> POSTITION HELD Manager <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Associa Club Management, Inc. ORGANIZATION Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Associa Community Association Websites, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** ☐ SPOUSE DEPENDENT CHILD X FILER Associa Community Development, Inc. ORGANIZATION Director/Chairman **POSTITION HELD POSITION HELD BY** X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ Associa Community Management Solutions, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** DEPENDENT CHILD \_\_\_\_\_ X FILER ☐ SPOUSE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Ethics Commission	P.O. Box 12070	Austin, Texas	3 78711-2070	(512)463-5800	1-800-	325-8506
BOARDS AND	EXECUTIVE	POSITIO	ONS		PART	12
☐ NOT APPLICABLE						
your spouse, or a depend ships, professional corpor stating the name of the or	lent child hold in cor rations, professional ganization and the on about a depende	porations, firm associations, position held.	ns, partnerships, lim joint ventures, othe For more informati ity, indicate the chil	a member and all executive polited partnerships, limited liabiliter business associations, or proon, see FORM PFSINSTRUC	ty partner- prietorship TION GUII	S,
<sup>1</sup> ORGANIZATION	Associa Corp	oorate Real Es	tate Services, Inc.			
<sup>2</sup> POSTITION HELD	Director					
<sup>3</sup> POSITION HELD BY	X FI	LER	SPOUSE	DEPENDENT CHILD	-	
ORGANIZATION	Associa Livii	ng, Inc.				
POSTITION HELD	Director					
POSITION HELD BY	X F	LER	☐ SPOUSE	DEPENDENT CHILD	_	
ORGANIZATION	Associa Mai	ntenance Field	Services, Inc.			
POSTITION HELD	Director					
POSITION HELD BY	X F	ILER	SPOUSE	DEPENDENT CHILD	_	
ORGANIZATION	Associa On	Call California,	Inc.			
POSTITION HELD	Director					
POSITION HELD BY	X F	ILER	SPOUSE	DEPENDENT CHILD	_	
ORGANIZATION	Associa On	Call Florida, Ind	C.			
POSTITION HELD	Director					
POSITION HELD BY	X F	ILER	SPOUSE	DEPENDENT CHILD		

PART 12 **BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Associa OnCall Nevada, Inc. <sup>1</sup> ORGANIZATION <sup>2</sup> POSTITION HELD Director <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Associa OnCall, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** ☐ SPOUSE X FILER DEPENDENT CHILD \_\_\_\_\_ Associa Title, LLC **ORGANIZATION** Manager **POSTITION HELD POSITION HELD BY** X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ Associated Management, Inc. **ORGANIZATION POSTITION HELD** Director POSITION HELD BY X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Association Communications, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_

### P.O. Box 12070 **PART 12** BOARDS AND EXECUTIVE POSITIONS ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION Association Policyholders, Inc. <sup>2</sup> POSTITION HELD Director <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Association Services, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Association Times, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ Associations Equity Management, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Associations Insurance Agency, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_

☐ SPOUSE

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

X FILER

DEPENDENT CHILD \_\_\_\_\_

#### Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 **PART 12 BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you. your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION California Association Services, Inc. <sup>2</sup> POSTITION HELD Director 3 POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD \_\_\_\_ Canyon Gate Real Estate Services, LLC **ORGANIZATION** Manager **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_

Carona Ranches, LLC

X FILER

Manager

**ORGANIZATION** 

**POSTITION HELD** 

POSITION HELD BY

ORGANIZATION	Certified Association Services	s, Inc.		
POSTITION HELD	Director			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Certified Management, Inc.			
POSTITION HELD	Director			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
COI	PY AND ATTACH ADDITI	ONAL PAGES AS	NECESSARY	
				TX-PFS Software Version 1.1

☐ SPOUSE

☐ DEPENDENT CHILD \_\_\_\_\_

## **BOARDS AND EXECUTIVE POSITIONS PART 12** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION Colonia, Inc. <sup>2</sup> POSTITION HELD Director 3 POSITION HELD BY X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Communities Global, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Community Archives, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Community Group, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD Community Management Concepts of Jacksonville, Inc. **ORGANIZATION POSTITION HELD** Director POSITION HELD BY X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_\_

## **PART 12 BOARDS AND EXECUTIVE POSITIONS** □ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION Community Management Concepts, Inc. 2 POSTITION HELD Director 3 POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ **Community Management Corporation ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_ Community Management Professionals, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ Community Management Services of Colorado, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Desert Resort Management, Inc. ORGANIZATION Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

Texas Etnics Commission P.O.	Box 12070	Austin, Texas	767   1-2070	(512)463-5800	1-800-325-8500
BOARDS AND EXE	CUTIVE	POSITIC	NS		PART 12
☐ NOT APPLICABLE					
List all boards of directors of wh your spouse, or a dependent ch ships, professional corporations stating the name of the organiza	ild hold in corpo , professional a	orations, firms ssociations, j	s, partnerships, limoint ventures, othe	ited partnerships, limited liabilit er business associations, or pro	y partner- prietorships,
When reporting information abo providing the number under whi	ut a dependent ch the child is li	child's activity sted on the C	y, indicate the childover Sheet.	d about whom you are reporting	j by
<sup>1</sup> ORGANIZATION	Development (	Consultants, In	C.		
<sup>2</sup> POSTITION HELD	Director				
<sup>3</sup> POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD	_
ORGANIZATION	EMB, Inc.				
POSTITION HELD	Director				
POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD	_
ORGANIZATION	First Association	ons Bank			
POSTITION HELD	Director	<del></del>			
POSITION HELD BY	X File	R	SPOUSE	DEPENDENT CHILD	_
ORGANIZATION	First Association	ons Title, Inc.			
POSTITION HELD	Director				
POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD	-
ORGANIZATION	First Association	ns, Inc.			
POSTITION HELD	Director				
POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD	-

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1-800-325-8506

#### **BOARDS AND EXECUTIVE POSITIONS** PART 12 ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. First Avenue Realty, Inc. <sup>1</sup> ORGANIZATION Director <sup>2</sup> POSTITION HELD 3 POSITION HELD BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Fox Valley Management Co. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_ Golden Pacific Association Management, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ H.R.W., Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Hawaii First, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

### P.O. Box 12070 PART 12 **BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION **HMS** Acquisition Corporation <sup>2</sup> POSTITION HELD Director 3 POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ HOA Collection Services, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ HOA Financial Services, LLC **ORGANIZATION** Manager **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ **HOAC** Acquisition Corporation **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Homeowner's Business Management, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

#### (512)463-5800 P.O. Box 12070 Austin, Texas 78711-2070 1-800-325-8506 **PART 12 BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Homeside Properties, Inc. <sup>1</sup> ORGANIZATION <sup>2</sup> POSTITION HELD Director <sup>3</sup> POSITION HELD BY X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Houston Community Management Services, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ JJC Holdings, LLC **ORGANIZATION** Manager **POSTITION HELD POSITION HELD BY** X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Jomar Association Services, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ Ken-Mar Consultants, LLC **ORGANIZATION** Manager **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_

Texas Ethics Commission P.C	D. Box 12070	Austin, Texas 7	78711-2070	(512)463-5800	1-800-3	325-8506
BOARDS AND EX	ECUTIVE	POSITIO	NS		PART	12
□ NOT APPLICABLE						
List all boards of directors of w your spouse, or a dependent c ships, professional corporation stating the name of the organiz	hild hold in corpo s, professional a	orations, firms issociations, jo	, partnerships, limite pint ventures, other l	ed partnerships, limited liability business associations, or prop	partner- rietorship	s.
When reporting information ab providing the number under when	out a dependent nich the child is li	child's activity isted on the C	v, indicate the child a over Sheet.	about whom you are reporting	by	
<sup>1</sup> ORGANIZATION	Kramer-Triad N	Management G	roup, LLC			
<sup>2</sup> POSTITION HELD	Manager					
<sup>3</sup> POSITION HELD BY	X FILE	ER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	Legum & Norm	nan Midwest, L	.L.C <sub>s</sub>			
POSTITION HELD	Manager					
POSITION HELD BY	X FILE	ER .	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	Legum & Norm	nan Realty, Inc.				
POSTITION HELD	Director					
POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	Lewis Manager	ment Resource	es, Inc.			
POSTITION HELD	Director					
POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	Lincoln Hancoo	ck Restoration,	LLC			
POSTITION HELD	Manager					
POSITION HELD BY	X FILE	R	SPOUSE	DEPENDENT CHILD		

## **PART 12 BOARDS AND EXECUTIVE POSITIONS** □ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. M&C Association Management Services, Inc. <sup>1</sup> ORGANIZATION Director <sup>2</sup> POSTITION HELD <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ MAMCO, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_ Management Advantage, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ Massingham & Associates Management, Inc. ORGANIZATION Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ McKay Management Corporation **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

# BOARDS AND EXECUTIVE POSITIONS □ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Mid-Atlantic Management Corporation <sup>1</sup> ORGANIZATION Director <sup>2</sup> POSTITION HELD 3 POSITION HELD BY X FILER ☐ SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Morris Property Management, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_ N.N. Jaeschke, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD \_\_\_\_\_ Nationwide Escrow Collection Specialists, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY ☐ SPOUSE X FILER □ DEPENDENT CHILD \_\_\_\_\_ NNJ Property Services, LLC **ORGANIZATION** Manager **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

**POSITION HELD BY** 

1-800-325-8506 Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 PART 12 BOARDS AND EXECUTIVE POSITIONS ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Pacific States Association Services, Inc. <sup>1</sup> ORGANIZATION <sup>2</sup> POSTITION HELD Director <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ Paradise Services, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Parker & Company, Inc., Consulting, Management & Investments **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** SPOUSE X FILER □ DEPENDENT CHILD \_\_\_\_\_ PCM Consulting Services, Inc. **ORGANIZATION POSTITION HELD** Director POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ PCM Data Services, Inc. **ORGANIZATION** Director **POSTITION HELD** 

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☐ SPOUSE

X FILER

■ DEPENDENT CHILD \_\_\_\_\_

## P.O. Box 12070 **PART 12 BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION PCM Escrow Services, Inc. Director <sup>2</sup> POSTITION HELD <sup>3</sup> POSITION HELD BY X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ PCM Realty & Marketing, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE □ DEPENDENT CHILD \_\_\_\_ Planned Community Services, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ PMG Holdings, Inc. **ORGANIZATION** Chairman/CEO **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Portfolio Global, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE □ DEPENDENT CHILD \_\_\_

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

## P.O. Box 12070 **BOARDS AND EXECUTIVE POSITIONS PART 12** □ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. <sup>1</sup> ORGANIZATION Portfolio United, Inc. <sup>2</sup> POSTITION HELD Director <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Prime Site Properties, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ■ DEPENDENT CHILD **ORGANIZATION** Prime Site, Incorporated Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD Principal Management Group, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_ **ORGANIZATION** Professional Community Management International, Inc. Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_

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<b>BOARDS AND EXE</b>	<b>CUTIVE POSITIO</b>	NS	PART 12	
☐ NOT APPLICABLE				
your spouse, or a dependent ch ships, professional corporations	ild hold in corporations, firms , professional associations, j	s, partnerships, limito oint ventures, other	n member and all executive positions you, ed partnerships, limited liability partner- business associations, or proprietorships, n, see FORM PFSINSTRUCTION GUIDE.	
When reporting information abo providing the number under whi			about whom you are reporting by	
<sup>1</sup> ORGANIZATION	Professional Community Mar	nagement of Californ	ia, Inc.	
<sup>2</sup> POSTITION HELD	Director			
<sup>3</sup> POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Professional Community Mai	nagement Services, I	inc.	
POSTITION HELD	Director			
POSITION HELD BY	X FILER	☐ SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Professional Community Mar	nagement, Inc.		
POSTITION HELD	Director			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	R & G Management Co., Inc			
POSTITION HELD	Director			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
ORGANIZATION	Radius Construction Group I	ncorporated		
POSTITION HELD	Director		1	
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	
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### (512)463-5800 1-800-325-8506 Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 PART 12 **BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Rampart Properties, Inc. <sup>1</sup> ORGANIZATION Director <sup>2</sup> POSTITION HELD 3 POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Rampart Risk Management, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE DEPENDENT CHILD Real Property Management, Inc. ORGANIZATION Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE ☐ DEPENDENT CHILD \_\_\_\_\_ Revel & Underwood Association Services, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ River Management, Development and Realty, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** □ DEPENDENT CHILD \_\_\_\_\_

☐ SPOUSE

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X FILER

# **BOARDS AND EXECUTIVE POSITIONS** ■ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Roger Kramer & Associates, Ltd. ORGANIZATION Director <sup>2</sup> POSTITION HELD 3 POSITION HELD BY X FILER ☐ SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Small Community Specialists, LLC **ORGANIZATION** Manager **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_ SoDev, LLC **ORGANIZATION** Manager **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ Somerset Association Management, Inc. **ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY X FILER SPOUSE ■ DEPENDENT CHILD \_\_\_\_\_ Specialty Carriers, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** ☐ DEPENDENT CHILD \_\_\_\_\_ X FILER ☐ SPOUSE COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXE	CUTIVE POSITION	ONS	PART 12		
☐ NOT APPLICABLE					
List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFSINSTRUCTION GUIDE.					
When reporting information abo providing the number under whi			d about whom you are reporting by		
<sup>1</sup> ORGANIZATION	Specialty Insurance Compar	ny of Hawaii, Inc.			
<sup>2</sup> POSTITION HELD	Director				
<sup>3</sup> POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	TCC Staff Management, Inc				
POSTITION HELD	Pres/Dir				
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	The Portfolio Consortium, In	C.			
POSTITION HELD	Director				
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	The Prescott Companies				
POSTITION HELD	Director				
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD		
ORGANIZATION	The Prescott Companies, LL	_C			
POSTITION HELD	Manager				
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

Austin, Texas 78711-2070

## PART 12 BOARDS AND EXECUTIVE POSITIONS □ NOT APPLICABLE List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. Today American Management, Inc. <sup>1</sup> ORGANIZATION Director <sup>2</sup> POSTITION HELD <sup>3</sup> POSITION HELD BY X FILER ☐ SPOUSE DEPENDENT CHILD \_\_\_\_\_ **Triad Corporation ORGANIZATION** Director **POSTITION HELD** POSITION HELD BY SPOUSE □ DEPENDENT CHILD \_\_\_\_ X FILER Triad Management Corporation **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_\_\_ Tyler Community Management, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** DEPENDENT CHILD \_\_\_\_\_ SPOUSE X FILER Urban Association Services, Inc. **ORGANIZATION** Director **POSTITION HELD POSITION HELD BY** X FILER ☐ SPOUSE □ DEPENDENT CHILD \_\_\_

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

BOARDS AND EXE	CUTIVE POSI	TIONS		PARI 12
☐ NOT APPLICABLE				
List all boards of directors of who your spouse, or a dependent ch ships, professional corporations stating the name of the organiza	ild hold in corporations, , professional associatio	firms, partnerships, limitens, joint ventures, othe	ited partnerships, limited liabili r business associations, or pro	ty partner- prietorships,
When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.				
<sup>1</sup> ORGANIZATION	Vanguard Association E	Employees, Corp		
<sup>2</sup> POSTITION HELD	Director			
<sup>3</sup> POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_
ORGANIZATION	Vanguard Community N	lanagement, Inc.		
POSTITION HELD	Director			
POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD	_
Co	OPY AND ATTACH AL	DDITIONAL PAGES A	AS NECESSARY	

Texas Ethics Commission

# PERSONAL FINANCIAL STATEMENT PARTS MARKED 'NOT APPLICABLE' BY FILER

Rather than printing a page for each Part the filer checked 'Not Applicable,' this page summarizes whether the 'Not Applicable' checkbox was checked for each Part. If the checkbox is checked next to a Part below, then no pages for that Part should be present in the report. If a checkbox is not checked, then pages for that Part should be present in the report.

Austin, Texas 78711-2070

□ N/A	Part 1A - Sources of Occupational Income
⊠ N/A	Part 1B - Retainers
□ N/A	Part 2 - Stock
X N/A	Part 3 - Bonds, Notes & Other Commercial Paper
⊠ N/A	Part 4 - Mutual Funds
□ N/A	Part 5 - Income from Interest, Dividends, Royalties & Rents
□ N/A	Part 6 - Personal Notes and Lease Agreements
□ N/A	Part 7A - Interests in Real Property
□ N/A	Part 7B - Interests in Business Entities
⊠ N/A	Part 8 - Gifts
X N/A	Part 9 - Trust Income
X N/A	Part 10A - Blind Trusts
X N/A	Part 10B - Trustee Statement
□ N/A	Part 11A - Assets of Business Associations
□ N/A	Part 11B - Liabilities of Business Associations
□ N/A	Part 12 - Boards and Executive Positions
⊠ N/A	Part 13 - Expenses Accepted Under Honorarium Exception
⊠ N/A	Part 14 - Interest in Business in Common with Lobbyist
X N/A	Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
⊠ N/A	Part 16 - Representation by Legislator Before State Agency
X N/A	Part 17 - Benefits Derived from Functions Honoring Public Servant
⊠ N/A	Part 18 - Legislative Continuances

#### PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verfied. The verfication page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

> I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2012, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

**NANCI LONGORIA** MY COMMISSION EXPIRES September 28, 2016



JOHN J. CARONA STATE SENATOR

BARBARA K. SALYERS CHIEF OF STAFF

CAPITOL OFFICE ROOM 4E.2 P.O. Box 12068 AUSTIN, TEXAS 78711

(512) 463-0116 (800) 662-0334 FAX (512) 463-3135 barbara.salyers@senate.state.tx.us

AFFIX NOTARY STAMP / SEAL ABOVE

Tohn Carona this the 3

Sworn to and subscribed before me by to certify which, witness my hand and seal of office.