

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 26, 2006 8:00 am**  
**Secretary of State**

04-26-2006 90173 013 \*\*\*\*70.00

**DOCUMENT # N05000002705**

1. Entity Name

VISTA GARDENS OF NAPLES CONDOMINIUM  
ASSOCIATION, INC.



Principal Place of Business

900 COLONY POINT CIRCLE, SUITE 310  
PEMBROKE PINES FL 33026

Mailing Address

900 COLONY POINT CIRCLE, SUITE 310  
PEMBROKE PINES FL 33026



2. Principal Place of Business

P.O. BOX 10527  
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 10527  
Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

NAPLES FL

City & State

NAPLES FL

4. FEI Number

20-39 93893

☒ Applied For

☐ Not Applicable

Zip

34101

Country

USA

Zip

34101

Country

USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROHAN, RORY  
900 COLONY POINT CIRCLE, SUITE 310  
PEMBROKE PINES FL 33026

7. Name and Address of New Registered Agent

Name Fernando Martinez

Street Address (P.O. Box Number is Not Acceptable)

6355 Vista Garden Way Unit A

City

NAPLES

FL

Zip Code

34112

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

4-6-06

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when constituting)

DATE

**FILE NOW: FEE IS \$61.25**

**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ROHAN, RORY ☒ Delete  
STREET ADDRESS 900 COLONY POINT CIRCLE, SUITE 310  
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE VD  
NAME ERSIG, DONALD ☒ Delete  
STREET ADDRESS 900 COLONY POINT CIRCLE, SUITE 310  
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE STD  
NAME ERSIG, PENNY ☒ Delete  
STREET ADDRESS 900 COLONY POINT CIRCLE, SUITE 310  
CITY-ST-ZIP PEMBROKE PINES FL 33026

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
NAME NANCY INTINTOLA  
STREET ADDRESS P.O. BOX 10527  
CITY-ST-ZIP NAPLES, FL 34101

TITLE V/S ☒ Change ☐ Addition  
NAME FERNANDO MARTINEZ  
STREET ADDRESS P.O. BOX 10527  
CITY-ST-ZIP NAPLES, FL 34101

TITLE T/D ☒ Change ☐ Addition  
NAME ROBERT K. Fordham  
STREET ADDRESS P.O. Box 10527  
CITY-ST-ZIP NAPLES, FL 34101

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

*Nancy Intintola*