DOCUMENT# N0600000320		

Entity Name: ISLES OF PORTO VISTA COMMUNITY ASSOCIATION, INC.

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

12734 KENWOOD LN. STE. 49 FT. MYERS, FL 33907

Current Mailing Address:

12734 KENWOOD LN. STE. 49 FT. MYERS, FL 33907 US

FEI Number: 20-8071310

Name and Address of Current Registered Agent:

TROPICAL ISLES MANAGEMENT SERVICES, INC. 12734 KENWOOD LN. SUITE 49 FORT MYERS, FL 33907 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	VP
Name	OFFENBERG, BERNIE	Name	HEROLD, DREW
Address	12734 KENWOOD LN., STE. 49	Address	12734 KENWOOD LN., STE. 49
City-State-Zip:	FT. MYERS FL 33907	City-State-Zip:	FT. MYERS FL 33907
Title	S/T	Title	ASM
Title Name	S/T SIMON, SIDNEY	Title Name	ASM RUDLAND, MARK
Name Address	SIMON, SIDNEY	Name Address	RUDLAND, MARK

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

VP

SIGNATURE: DREW HEROLD

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date