

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004656

FILED  
Feb 07, 2009  
Secretary of State

**Entity Name:** PORTO VISTA CONDOMINIUM NO. 12 ASSOCIATION, INC.

**Current Principal Place of Business:**

1502 SW 50TH STREET  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SILVERCRESTED MANAGEMENT LLC  
PO BOX 1848  
FORT MYERS, FL 33902

**New Mailing Address:**

**FEI Number:** 01-0783186

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SILVERCRESTED MANAGEMENT LLC  
3440 MARINATOWN LANE  
203  
NORTH FORT MYERS, FL 33903 US

**Name and Address of New Registered Agent:**

SILVERCRESTED MANAGEMENT LLC  
3436 MARINATOWN LANE  
1ST FL UNIT 4  
NORTH FORT MYERS, FL 33903 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: CHAD M. VAN TILBURG

02/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHENKEL, JOANN  
Address: 11717 LADY ANNE CIRCLE  
City-St-Zip: CAPE CORAL, FL 33991

Title: PD (X) Delete  
Name: BERGAU, GEORGE J  
Address: 1502 SW 50TH STREET #302  
City-St-Zip: CAPE CORAL, FL 33914

Title: D (X) Delete  
Name: MOCHAN, JAMES  
Address: 2594 ALAN DRIVE  
City-St-Zip: WILLOUGHBY HILLS, OH 44092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: SHENKEL, JO ANN  
Address: 11717 LADY ANNE CIRCLE  
City-St-Zip: CAPE CORAL, FL 33991

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JO ANN SHENKEL

VD

02/07/2009

Electronic Signature of Signing Officer or Director

Date