

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000010669

1. Entity Name  
ISLES OF PORTO VISTA CONDOMINIUM 18  
ASSOCIATION, INC.



Principal Place of Business  
3800 DEL PRADO BLVD.  
CAPE CORAL, FL 33928

Mailing Address  
3800 DEL PRADO BLVD.  
CAPE CORAL, FL 33928

2. Principal Place of Business - No P.O. Box #

12734 Kenwood Ln.

Suite, Apt. #, etc.

Ste. 49

City & State

Ft. Myers, FL

Zip

33907

Country

3. Mailing Address

12734 Kenwood Ln.

Suite, Apt. #, etc.

Ste. 49

City & State

Ft. Myers, FL

Zip

33907

Country

09052007

Chg-NP

CR2E037 (12/06)

4. FEI Number

20-5258889

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOLANOS TRUXTON, P.A.  
12800 UNIVERSITY DR., STE. 350  
FT. MYERS, FL 33907

7. Name and Address of New Registered Agent

Name

Tropical Isles Management Services, Inc.

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

12734 Kenwood Ln., Ste. 49

City

Ft. Myers

FL

Zip Code

33907

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 typed or printed name of registered agent and title if applicable.

MARK RUDLAND

(NOTE: Registered Agent signature required when re-registering)

9/11/07

DATE

Filing Fee is \$61.25  
Due by September 14, 2007

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 D ☒ Delete  
NAME DEBITETTO, JOHN  
STREET ADDRESS 3800 DEL PRADO BLVD.  
CITY-ST-ZIP CAPE CORAL, FL 33928

TITLE D ☒ Delete  
NAME BERRY, MARK C.  
STREET ADDRESS 3800 DEL PRADO BLVD.  
CITY-ST-ZIP CAPE CORAL, FL 33928

TITLE D ☒ Delete  
NAME CORBIN, DELINDA  
STREET ADDRESS 3800 DEL PRADO BLVD.  
CITY-ST-ZIP CAPE CORAL, FL 33928

TITLE ☐ Delete  
NAME   
STREET ADDRESS   
CITY-ST-ZIP   
\$9119

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 D ☐ Change ☒ Addition  
NAME Gil Tenzer  
STREET ADDRESS 411 West Putnam Ave., Ste. 225  
CITY-ST-ZIP Greenwich, CT 06830

TITLE D ☐ Change ☒ Addition  
NAME Drew Herold  
STREET ADDRESS 411 W. Putnam Ave., Ste. 225  
CITY-ST-ZIP Greenwich, CT 06830

TITLE D ☐ Change ☒ Addition  
NAME Michael Halperin  
STREET ADDRESS 411 W. Putnam Ave., Ste. 225  
CITY-ST-ZIP Greenwich, CT 06830

TITLE ASm ☐ Change ☒ Addition  
NAME mark Rudland  
STREET ADDRESS 12734 Kenwood Ln., Ste. 49  
CITY-ST-ZIP Ft. Myers, FL 33907

TITLE ☐ Change ☐ Addition  
NAME   
STREET ADDRESS 300108562883  
CITY-ST-ZIP 09/18/07--01021--004 \*\*61.25

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 Chapter 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARK RUDLAND

Date

9/11/07

Daytime Phone #

939-2795

FILED

07 SEP 18 AM 11:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

