2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009691

FILED Apr 01, 2010 Secretary of State

Entity Name: ISLES OF PORTO VISTA CONDOMINIUM 3 ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12734 KENWOOD LANE 12734 KENWOOD LANE

STE 49 STE 49

FT. MYERS, FL 33907 FT. MYERS, FL 33907

Current Mailing Address: New Mailing Address:

12734 KENWOOD LANE 12734 KENWOOD LANE STE. 49

STE. 49

FT. MYERS, FL 33907 US

FEI Number: 20-4153494 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TROPICAL ISLES MANAGEMENT SERVICE, INC. 12734 KENWOOD LANE

STE. 49

FT. MYERS, FL 33907

FT. 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 Date

OFFICERS AND DIRECTORS:

YOST, KEN Name:

Address: 3952 POMODORO CIR #302 City-St-Zip: CAPE CORAL, FL 33909 US

Title:

Name: MULLEE, SPENCER

Address: 1950 N. STEMMONS FWY., STE, 2012

City-St-Zip: DALLAS, TX 75207

Title: S/T

HEROLD, DREW Name:

Address: 411 WEST PUTNAM, STE. 225 City-St-Zip: GREENWICH, CT 06830

Title: ASM

Name: RUDLAND, MARK

12734 KENWOOD LN, STE. 49 Address: City-St-Zip: FT. MYERS, FL 33907

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.

SIGNATURE: DREW HEROLD S/T 04/01/2010