

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008226

**Entity Name:** TERRA VISTA CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 23, 2015**  
**Secretary of State**  
**CC7019899337**

**Current Principal Place of Business:**

11691 GATEWAY BLVD.  
203  
FT. MYERS, FL 33913

**Current Mailing Address:**

11691 GATEWAY BLVD.  
203  
FT. MYERS, FL 33913

**FEI Number: 20-5354192**

**Certificate of Status Desired: No**

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

VISION ASSOCIATION MANAGEMENT  
11691 GATEWAY BLVD.  
203  
FT. MYERS, FL 33913 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            REARDON, LINDA  
Address        11691 GATEWAY BLVD. SUITE 203  
City-State-Zip: FORT MYERS FL 33913

Title            STD  
Name            BARBER, CRAIG  
Address        11691 GATEWAY BLVD. SUITE 203  
City-State-Zip: FORT MYERS FL 33913

Title            VP  
Name            MIZIO, LOUIS  
Address        11691 GATEWAY BLVD. SUITE 203  
City-State-Zip: FORT MYERS FL 33913

*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: BARBER , CRAIG**

**STD**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date