

FORM 1

**STATEMENT OF
FINANCIAL INTERESTS**

2020

Please print or type your name, mailing address, agency name, and position below:

FOR OFFICE USE ONLY:

LAST NAME -- FIRST NAME -- MIDDLE NAME :

PROVINZINO Tony

MAILING ADDRESS :

20328 Cypress Shadows Blvd

ESTERO, FL 33928 Lee

CITY : ZIP : COUNTY :

NAME OF AGENCY :

Cypress Shadows CDD

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Seat #3 CDD Board

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE


6/22

21JUN24PM0847 SDE Lee Co FI

**** THIS SECTION MUST BE COMPLETED ****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2020.

MANNER OF CALCULATING REPORTABLE INTERESTS:

FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Sun Coast Global	4990 Coconut Rd 311	Real Estate Co.
Isla Blue Development	4191 Bay Beach Lane 272	Development Co.

PART B -- SECONDARY SOURCES OF INCOME

[Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions]
(If you have nothing to report, write "none" or "n/a")

See Attached

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc. - See instructions]
(If you have nothing to report, write "none" or "n/a")

TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
SNAP, BTC, CYDY	Stocks in Brokerage acct

PART E — LIABILITIES [Major debts - See instructions]
(If you have nothing to report, write "none" or "n/a")

NAME OF CREDITOR	ADDRESS OF CREDITOR
Wells Fargo Mortgage	

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses - See instructions]
(If you have nothing to report, write "none" or "n/a")


NAME OF BUSINESS ENTITY	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
	ISLA Blue Development	CAMINO Investments LLC
ADDRESS OF BUSINESS ENTITY	4191 BB Lane # 272	20378 Cypress Shadows
PRINCIPAL BUSINESS ACTIVITY	Real Estate Investment	Real Estate
POSITION HELD WITH ENTITY	MANAGER	MANAGER
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	50%	100
NATURE OF MY OWNERSHIP INTEREST	PARTNER	PARTNER

PART G — TRAINING For elected municipal officers, appointed school superintendents, and commissioners of a community redevelopment agency created under Part III, Chapter 163 required to complete annual ethics training pursuant to section 112.3142, F.S.

I CERTIFY THAT I HAVE COMPLETED THE REQUIRED TRAINING.

IF ANY OF PARTS A THROUGH G ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE OF FILER:

Signature: 

Date Signed: 6-22-21

CPA or ATTORNEY SIGNATURE ONLY

If a certified public accountant licensed under Chapter 473, or attorney in good standing with the Florida Bar prepared this form for you, he or she must complete the following statement:

I, _____, prepared the CE Form 1 in accordance with Section 112.3145, Florida Statutes, and the instructions to the form. Upon my reasonable knowledge and belief, the disclosure herein is true and correct.

CPA/Attorney Signature: _____

Date Signed: _____

FILING INSTRUCTIONS:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location. To determine what category your position falls under, see page 3 of instructions.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.) Form 1 filers who file with the Supervisor of Elections may file by mail or email. Contact your Supervisor of Elections for the mailing address or email address to use. Do not email your form to the Commission on Ethics, it will be returned.

State officers or specified state employees who file with the Commission on Ethics may file by mail or email. To file by mail, send the completed form to P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 325 John Knox Rd, Bldg E, Ste 200, Tallahassee, FL 32303. To file with the Commission by email, scan your completed form and any attachments as a pdf (do not use any other format), send it to CEForm1@leg.state.fl.us and retain a copy for your records. Do not file by both mail and email. Choose only one filing method. Form 6s will not be accepted via email.

Candidates file this form together with their filing papers.

MULTIPLE FILING UNNECESSARY: A candidate who files a Form 1 with a qualifying officer is not required to file with the Commission or Supervisor of Elections.

WHEN TO FILE: Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates must file at the same time they file their qualifying papers.

Thereafter, file by July 1 following each calendar year in which they hold their positions.

Finally, file a final disclosure form (Form 1F) within 60 days of leaving office or employment. Filing a CE Form 1F (Final Statement of Financial Interests) does not relieve the filer of filing a CE Form 1 if the filer was in his or her position on December 31, 2020.



Part "C" 6-22-2021

Chat with us!

Lee County Property Appraiser

Home About Us Database Search Departments Taxpayer Services Exemptions GeoView Login

Real Property Search

Search by Name for 'Isla blue' found 5 matches

STRAP / Folio ID	Owner	Site Address / Property Description	Links
04-45-23-C4-04708.0330	ISLA BLUE DEVELOPMENT LLC	3920 SW 20TH PL CAPE CORAL FL 33914	Parcel Details Aerial Viewer Tax Estimator Variance Report
10101084	4191 BAY BEACH LN # 272 FORT MYERS BEACH FL 33931	CAPE CORAL UNIT 70 BLK 4708 PB 22 PG 76 LOTS 33 + 34	View Comps Change Address 2020 TRIM
05-45-26-04-00005.0120	ISLA BLUE DEVELOPMENT LLC	2608/2610 MARTIN AVE S LEHIGH ACRES FL 33973	Parcel Details Aerial Viewer Tax Estimator Variance Report
10343810	4191 BAY BEACH LN #272 FORT MYERS BEACH FL 33931	LEHIGH ESTATES UNIT 4 BLK 5 PB 15 PG 84 LOT 12	View Comps Change Address 2020 TRIM
36-44-27-06-00023.0020	ISLA BLUE DEVELOPMENT LLC	120 JOHNS AVE LEHIGH ACRES FL 33936	Parcel Details Aerial Viewer Tax Estimator Variance Report
10396245	4191 BAY BEACH LN UNIT 272 FORT MYERS BEACH FL 33931	LEHIGH ACRES UNIT 6 BLK 23 DB 254 PG 25 LOT 2	View Comps Change Address 2020 TRIM
15-45-27-05-00030.0080	ISLA BLUE DEVELOPMENT LLC	746 THEODORE VAIL ST E LEHIGH ACRES FL 33974	Parcel Details Aerial Viewer Tax Estimator Variance Report
10416485	4191 BAY BEACH LN UNIT 272 FORT MYERS BEACH FL 33931	LEHIGH ACRES UNIT 5 BLK 30 PB 18 PG 41 LOT 8	View Comps Change Address 2020 TRIM
15-45-27-05-00035.0110	ISLA BLUE DEVELOPMENT LLC	752 MANHATTAN ST E LEHIGH ACRES FL 33974	Parcel Details Aerial Viewer Tax Estimator Variance Report
10416581	4191 BAY BEACH LN # 272 FORT MYERS BEACH FL 33931	LEHIGH ACRES UNIT 5 BLK 35 PB 18 PG 41 LOT 11	View Comps Change Address 2020 TRIM



Modify Current Search

New Search

Tony Provenzano
20328 Cypress Shadores Blvd.
Estero, Florida 33928

21 JUN 24 AM 0847 50 EL ee Co FI



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1021 FT MYERS FL

POSTAGE WILL BE PAID BY ADDRESSEE

SUPERVISOR OF ELECTIONS
PO BOX 2545
FORT MYERS FL 33902-9888

FT MYERS FL 33902
JUN 20 2021 PM 5:1

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

