

FORM 1

STATEMENT OF FINANCIAL INTERESTS

2021

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 Shadow Blvd

Estero, FL 33928 Lee

NAME OF AGENCY :

Cypress Shadow CDD

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

Seat #3, CDD Board

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

✓
6/4

22JUN07AM0554 50E Lee CofI

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

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR CALENDAR YEAR ENDING DECEMBER 31, 2021.

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
<i>SUN COAST Coastal</i>	<i>9990 Coconut Rd 311</i>	<i>Real Estate Co</i>
<i>Isla Blue Develop</i>	<i>4191 Bay Beach Lane 272</i>	<i>Development Co</i>

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")

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
CYDY	Stock

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 Home Loan	

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	CAMINO
ADDRESS OF BUSINESS ENTITY	4191 Bay Beach Ln 272	20328 Cypress Shallow
PRINCIPAL BUSINESS ACTIVITY	Real Estate	Res Estate
POSITION HELD WITH ENTITY	MANAGER	MANAGER
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	50%	1%
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:

6-4-2022

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, 2021.



Lee County Property Appraiser

Part "C" 6-22-2022

Chat with us!

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



Modify Current Search

New Search

Tony Provinzino
20328 Cypress Shadovus Blvd.
Estero, Florida 33928

*22JUN07AM0854 SOE L ee Co FI

TAMPA FL 335
4 JUN 2022 PM 5 L



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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

