

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 749225

**Entity Name:** SANTA CLARA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3312 NORTHSIDE DRIVE  
KEY WEST, FL 33040

**Current Mailing Address:**

3312 NORTHSIDE DRIVE  
KEY WEST, FL 33040

**FEI Number:** 59-1940755

**Certificate of Status Desired:** No

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

THOMPSON, DEAN  
3312 NORTHSIDE DRIVE  
KEY WEST, FL 33040 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            KOFOID, OLIVER  
Address        3312 NORTHSIDE DR  
City-State-Zip: KEY WEST FL 33040

Title            VICE PRESIDENT  
Name            BROWN, MIKE  
Address        3312 NORTHSIDE DRIVE  
City-State-Zip: KEY WEST FL 33040

Title            TREASURER/SECRETARY  
Name            WALSH, JOHN  
Address        3312 NORTHSIDE DR.  
City-State-Zip: KEY WEST FL 33040

Title            DIRECTOR  
Name            HORTON, PETER  
Address        3312 NORTHSIDE DRIVE  
City-State-Zip: KEY WEST FL 33040

*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:** OLIVER KOFOID

**PRESIDENT**

**10/15/2019**

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

\_\_\_\_\_  
Date