

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000009595

**Entity Name:** SAN LINO CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**

C/O LIGHTHOUSE PROPERTY MANAGEMENT, INC.  
530 US HWY 41 BYPASS S. #9B  
VENICE, FL 34285

**Current Mailing Address:**

C/O LIGHTHOUSE PROPERTY MANAGEMENT, INC.  
530 US HWY 41 BYPASS S #9B  
VENICE, FL 34285 US

**FEI Number:** 20-3521495**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

COCHRAN, MICHAEL F. ESQ.  
LAW OFFICES OF WELLS, OLAH  
1800 SECOND STREET SUITE 808  
SARASOTA, FL 34236 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:** MICHAEL COCHRAN, ESQ

03/04/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           KENNY, ROBERT F.  
Address        C/O LIGHTHOUSE PROPERTY  
                 MANAGEMENT, INC.  
                 530 US HWY 41 BYPASS S #9B  
City-State-Zip: VENICE FL 34285  
  
Title            VP  
Name           RAWN, PAM  
Address        C/O LIGHTHOUSE PROPERTY  
                 MANAGEMENT, INC.  
                 530 US HWY 41 BYPASS S #9B  
City-State-Zip: VENICE FL 34285

Title            TREASURER  
Name           MARAWSKI, DANIEL F.  
Address        C/O LIGHTHOUSE PROPERTY  
                 MANAGEMENT, INC.  
                 530 US HWY 41 BYPASS S #9B  
City-State-Zip: VENICE FL 34285  
  
Title            D  
Name           GRAHAM, CHARLES  
Address        C/O LIGHTHOUSE PROPERTY  
                 MANAGEMENT, INC.  
                 530 US HWY 41 BYPASS S #9B  
City-State-Zip: VENICE FL 34285

*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:** ROBERT KENNY

PRESIDENT

03/04/2021

Electronic Signature of Signing Officer/Director Detail

Date