

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729315

FILED
Jan 10, 2009
Secretary of State

Entity Name: SANTONA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6565 SANTONA ST APT B-100
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

6565 SANTONA ST APT B-100
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 59-1652713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCLAFANI, NANCY
6580 SANTONA ST., A-31
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

SCLAFANI, NANCY SEC
6580 SANTONA ST., A-31
CORAL GABLES, FL 33146 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: NANCY SCLAFANI

01/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LLANO, MANUEL
Address: 1120 HARDEE RD
City-St-Zip: MIAMI, FL 33146

Title: SD () Delete
Name: SCLAFANI, NANCY
Address: 6580 SANTONA ST A-31
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: PETERSON, IRENE
Address: 5770 SW 56 STREET
City-St-Zip: MIAMI, FL 33155

Title: VPD () Delete
Name: LLANO, MARTHA
Address: 1120 HARDEE RD
City-St-Zip: MIAMI, FL 33146

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: GONZALEZ, MISAEAL
Address: 12041 SW 120 TERR
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NANCY SCLAFANI

SEC

01/10/2009

Electronic Signature of Signing Officer or Director

Date