

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729315

FILED  
Jan 04, 2010  
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 SEC  
6580 SANTONA ST., A-31  
CORAL GABLES, FL 33146 US

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

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

**OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D  
Name: GONZALEZ, MISAEAL  
Address: 12041 SW 120 TERR  
City-St-Zip: MIAMI, FL 33186

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: NANCY SCLAFANI

SEC

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date