

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000080857

FILED
Apr 17, 2009
Secretary of State

Entity Name: SANTONA CORNER 320 LLC

Current Principal Place of Business:

925 S ALHAMBRA CIR
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

925 S ALHAMBRA CIR
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 26-3301066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVE
2ND FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

POSTEN, KATHRYN R MBR MGR
925 SOUTH ALHAMBRA CIRCLE
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: KATHRYN R. POSTEN

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POSTEN, CHARLES J
Address: 925 S ALHAMBRA CIR
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR () Delete
Name: POSTEN, KATHRYN R
Address: 925 S ALHAMBRA CIR
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHRYN R. POSTEN

MGR

04/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date