2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011692

FILED May 05, 2009 Secretary of State

Entity Name: SANTONA CORNER CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6915 RED ROAD 1430 SOUTH DIXIE HIGHWAY

SUITE 205 SUITE 300

CORAL GABLES, FL 33143 CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

6915 RED ROAD 1430 SOUTH DIXIE HIGHWAY

SUITE 205 SUITE 300

CORAL GABLES, FL 33143 CORAL GABLES, FL 33146

FEI Number: 83-0509348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TAHA, DANNY S

6915 RED ROAD STE 205

MIAMI, FL 33143

US

BAUMGARTNER, SALLY L

1430 SOUTH DIXIE HIGHWAY

SUITE 300

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: SALLY BAUMGARTNER 05/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: PD (X) Change () Addition

Name: TAHA, DANNY S Name: TAHA, DANNY Address: 6915 RED ROAD, SUITE 205 Address: 6915 RED ROAD, SUITE 205

City-St-Zip: CORAL GABLES, FL 33143 City-St-Zip: CORAL GABLES, FL 33143

Title: VP () Delete Title: VPSD (X) Change () Addition Name: TAHA, SAMIR Name: TAHA, DEAN

 Name:
 TAHA, SAMIR
 Name:
 TAHA, DEAN

 Address:
 6915 RED ROAD. SUITE 205
 Address:
 6915 RED ROAD. SU

 Address:
 6915 RED ROAD, SUITE 205
 Address:
 6915 RED ROAD, SUITE 205

 City-St-Zip:
 CORAL GABLES, FL 33143
 City-St-Zip:
 CORAL GABLES, FL 33143

Title: () Delete Title: TD () Change (X) Addition

Name: ORTIZ, LISSETTE

Address: Address: 1430 SOUTH DIXIE HIGHWAY, SUITE 321

City-St-Zip: City-St-Zip: CORAL GABLES, FL 33146

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: DANNY TAHA PD 05/05/2009