

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729315

**Entity Name:** SANTONA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 59-1652713

**Certificate of Status Desired:** No

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

KRAPF, JAMES K  
8900 SW 120 STREET  
MIAMI, FL 33176 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name LLANO, MANUEL  
Address 3419 GRANADA BLVD  
City-State-Zip: CORAL GABLES FL 33134

Title VPD  
Name LLANO, MARTHA  
Address 3419 GRANADA BLVD  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name CABREJA, ONDINA  
Address 6565 SANTONA STREET  
#B-100  
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR  
Name TURETSKY, ROBIN  
Address 6565 SANTONA STREET  
#B-100  
City-State-Zip: CORAL GABLES FL 33146

Title DIRECTOR  
Name LLANO, JOSH  
Address 6565 SANTONA STREET  
#B-100  
City-State-Zip: CORAL GABLES FL 33146

*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: MANUEL LLANO**

**PRESIDENT**

**01/09/2020**

Electronic Signature of Signing Officer/Director Detail

Date