

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000002691

**Entity Name:** 1711 ENSENADA UNO CONDOMINIUM OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**913 EAST GONZALEZ STREET  
PENSACOLA, FL 32503**Current Mailing Address:**913 EAST GONZALEZ STREET  
PENSACOLA, FL 32503 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOVATO, HALLEY S  
913 EAST GONZALEZ STREET  
PENSACOLA, FL 32503 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           | D                        |
| Name            | LOVATO, HALLEY S         |
| Address         | 913 EAST GONZALEZ STREET |
| City-State-Zip: | PENSACOLA FL 32503       |

|                 |                          |
|-----------------|--------------------------|
| Title           | D                        |
| Name            | LOVATO, HOLLY            |
| Address         | 913 EAST GONZALEZ STREET |
| City-State-Zip: | PENSACOLA FL 32503       |

|                 |                          |
|-----------------|--------------------------|
| Title           | D                        |
| Name            | PRINTISS, PAUL           |
| Address         | 913 EAST GONZALEZ STREET |
| City-State-Zip: | PENSACOLA FL 32503       |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | SCHREY, DAMIAN        |
| Address         | 4994 SPRINGHILL DRIVE |
| City-State-Zip: | PENSACOLA FL 32503    |

*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: HALLEY S. LOVATO****DIRECTOR****01/11/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date