

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000080857

**Entity Name:** SANTONA CORNER 320 LLC

**Current Principal Place of Business:**

925 SOUTH ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146

**Current Mailing Address:**

925 SOUTH ALHAMBRA CIRCLE  
CORAL GABLES, FL 33146 US

**FEI Number:** 26-3301066

**Certificate of Status Desired:** No

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

POSTEN, KATHRYN RMBR 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	POSTEN, CHARLES J	Name	POSTEN, KATHRYN R
Address	925 SOUTH ALHAMBRA CIRCLE	Address	925 SOUTH ALHAMBRA CIRCLE
City-State-Zip:	CORAL GABLES FL 33146	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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KATHRYN R POSTEN

**MGR MBR**

**01/12/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date