

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000067937

**Entity Name:** SANTA INES OF WEST TAMPA, LLC

**Current Principal Place of Business:**

2931 WEST HILLSBOROUGH AVENUE  
TAMPA, FL 33614

**Current Mailing Address:**

2931 W HILLSBOROUGH AVE  
TAMPA, FL 33614 US

**FEI Number:** 45-5374912

**Certificate of Status Desired:** No

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

CURRAN K. PORTO, P.A.  
2803 SAFE HARBOR DR.  
TAMPA, FL 33618 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  
Name SANTA INES MGT CO., LLC  
Address 2931 WEST HILLSBOROUGH AVENUE  
  
City-State-Zip: TAMPA FL 33614

*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:** DUNIA MOLE

**PRESIDENT**

**02/06/2024**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date