

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007340

**Entity Name:** CORAL TRACE OFFICE PARK CONDOMINIUM ASSOCIATION, INC.**FILED**  
**Jan 26, 2023**  
**Secretary of State**  
**5550054385CC****Current Principal Place of Business:**19790 WEST DIXIE HIGHWAY PH2  
AVENTURA, FL 33180**Current Mailing Address:**19790 WEST DIXIE HIGHWAY PH2  
AVENTURA, FL 33180 US**FEI Number: 20-5188011****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LERMAN REALTY GROUP INC.  
19790 WEST DIXIE HIGHWAY PH2  
AVENTURA, FL 33180 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: JORGE LERMAN****01/26/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** SD, TREASURER  
**Name** ANDERSON, DONOVAN  
**Address** 19790 WEST DIXIE HIGHWAY PH2  
**City-State-Zip:** AVENTURA FL 33180**Title** ASD  
**Name** LERMAN, JORGE  
**Address** 19790 WEST DIXIE HIGHWAY PH2  
**City-State-Zip:** AVENTURA FL 33180**Title** ASS SECRETARY, DIRECTOR  
**Name** LERMAN, BENJAMIN  
**Address** 19790 WEST DIXIE HIGHWAY PH2  
**City-State-Zip:** AVENTURA FL 33180**Title** VP, DIRECTOR  
**Name** ACEVEDO, JEAN  
**Address** 2605 WEST ATLANTIC AVE SUITE D102  
**City-State-Zip:** DELRAY BEACH FL 33444**Title** PRESIDENT, DIRECTOR  
**Name** DELSING, BART  
**Address** 2605 WEST ATLANTIC AVE SUITE A202  
**City-State-Zip:** DELRAY BEACH FL 33445

*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: JORGE LERMAN****AS****01/26/2023**

Electronic Signature of Signing Officer/Director Detail

Date