

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09082

**FILED**  
**Apr 17, 2018**  
**Secretary of State**  
**CC5926936095**

**Entity Name:** CORAL LAKE AT BOCA RATON HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O LINDSAY-TAYLOR PROPERTY MGMT.  
4300 N UNIVERSITY DR A102  
LAUDERHILL, FL 33351

**Current Mailing Address:**

C/O LINDSAY-TAYLOR PROPERTY MGMT.  
4300 N UNIVERSITY DR A102  
LAUDERHILL, FL 33351 US

**FEI Number: 65-0287140**

**Certificate of Status Desired: No**

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

KATZMAN CHANDLER PA  
1500 W CYPRESS CREEK RD  
408  
FORT LAUDERDALE, FL 33309 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:** AMANDA TAYLOR

04/17/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           RODRIGUEZ, LORRAINE  
Address        C/O LINDSAY-TAYLOR PROPERTY  
                  MGMT.  
                  4300 N UNIVERSITY DR A102  
City-State-Zip: LAUDERHILL FL 33351

Title           PRESIDENT  
Name           ARMAS, OSCAR  
Address        C/O LINDSAY-TAYLOR PROPERTY  
                  MGMT.  
                  4300 N UNIVERSITY DR A102  
City-State-Zip: LAUDERHILL FL 33351

Title           SECRETARY  
Name           FREEMAN, LYNN  
Address        C/O LINDSAY-TAYLOR PROPERTY  
                  MGMT.  
                  4300 N UNIVERSITY DR A102  
City-State-Zip: LAUDERHILL FL 33351

Title           VP  
Name           BAGGIO, FEDERICO  
Address        C/O LINDSAY-TAYLOR PROPERTY  
                  MGMT.  
                  4300 N UNIVERSITY DR A102  
City-State-Zip: LAUDERHILL FL 33351

Title           DIRECTOR  
Name           ANTONACCI, TONI  
Address        C/O LINDSAY-TAYLOR PROPERTY  
                  MGMT.  
                  4300 N UNIVERSITY DR A102  
City-State-Zip: LAUDERHILL FL 33351

*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:** OSCAR ARMAS

**PRESIDENT**

04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date