

**2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000002632

**Entity Name:** SRA/CCD, LTD.

**Current Principal Place of Business:**

SRA/CCD, LTD.  
5345 PINE TREE DRIVE C/O JOANNA GOLDEN, SENIOR VP  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

SRA/CCD, LTD.  
5345 PINE TREE DRIVE C/O JOANNA GOLDEN, SENIOR VP  
MIAMI BEACH, FL 33140 US

**FEI Number:** 65-0799508

**Certificate of Status Desired:** No

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

STEIN, CLIFFORD MESQ.  
5345 PINE TREE DRIVE  
MIAMI, FL 33140 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

**General Partner Detail :**

Document # P97000102723  
Name SRA/CCD, INC.  
Address 5345 PINE TREE DRIVE  
C/O JOANNA GOLDEN, SENIOR VP  
City-State-Zip: MIAMI BEACH FL 33140

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLIFFORD M STEIN

**PRESIDENT**

**04/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date