

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

DOCUMENT# N00000003177

**Entity Name:** CORAL TRACE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

190 CORAL TRACE BLVD  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

C/O SEACREST SERVICES, INC.  
2101 CENTREPARK W DR, #110  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 90-0023431

**Certificate of Status Desired:** No

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

SKRLD, INC  
201 ALHAMBRA CIR #1100  
CORAL GABLES, FL 33134 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:** SKRLD, INC

02/13/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MAGEE, BARBARA  
Address        353 W. CORAL TRACE CIR  
City-State-Zip: DELRAY BEACH FL 33445

Title            VP  
Name            BLOCH, RENE  
Address        232 W. CORAL TRACE CIRCLE  
City-State-Zip: DELRAY BEACH FL 33445

Title            DIRECTOR  
Name            FINTON, STEWART  
Address        321 WEST CORAL TRACE CIRCLE  
City-State-Zip: DELRAY BEACH FL 33445

Title            DIRECTOR  
Name            WILSON, WENDY  
Address        2515 NORTH CORAL TRACE CIRCLE  
City-State-Zip: DELRAY BEACH FL 33445

Title            TREASURER  
Name            BRENNAN, ROBERT  
Address        329 W CORAL TRACE CIRCLE  
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:** BARBARA MAGEE

**BOD PRESIDENT**

02/13/2023

Electronic Signature of Signing Officer/Director Detail

Date