

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000136419

**Entity Name:** CORAL GABLES ASSOCIATES, LLC

**Current Principal Place of Business:**

C/O 9830 COLONNADE BLVD.  
SUITE 600  
SAN ANTONIO, TX 78230-2239

**Current Mailing Address:**

C/O 9830 COLONNADE BLVD.  
SUITE 600  
SAN ANTONIO, TX 78230-2239 US

**FEI Number: 74-2676130**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MEMBER  
Name COLCTR, LTD  
Address C/O 9830 COLONNADE BLVD.  
SUITE 600  
City-State-Zip: SAN ANTONIO TX 78230-2239

*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: COLCTR, LTD** \_\_\_\_\_

**MEMBER**

**04/26/2021**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date