


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90169 029 ****61.25

DOCUMENT # N97000001625				
1. Entity Name THE COMMUNITIES AT MARCUS LAKE HOMEOWNERS ASSOCIATION, INC.				
Principal Place of Business 3298 SUMMIT BLVD #4 PENSACOLA, FL 32503		Mailing Address 3298 SUMMIT BLVD #4 PENSACOLA, FL 32503		
2. Principal Place of Business - No P.O. Box # 908 Gardengate Cir		3. Mailing Address 908 Gardengate Cir		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State Pensacola, FL		City & State Pensacola FL		
4. FEI Number 58-2385191		Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ETHERIDGE, RAY O 3298 SUMMIT BLVD #4 PENSACOLA, FL 32503		7. Name and Address of New Registered Agent		
Name		Name		
Street Address (P.O. Box Number is Not Acceptable) 3298 Summit Blvd #4		Street Address (P.O. Box Number is Not Acceptable) 908 Gardengate Cir		
City Pensacola, FL		City Pensacola, FL		
Zip Code 32503		Zip Code 32504		
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE <i>Ray Etheridge</i>		DATE Apr. 30, 2008		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VPD STINER, JOANN	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7072 RAMPART WAY		NAME	
STREET ADDRESS	PENSACOLA, FL 32505		STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE	SD PREER, SANDRA J	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2680 HEYWARD DR		NAME	SD Marie Abney
STREET ADDRESS	PENSACOLA, FL 32505		STREET ADDRESS	7199 Rampart Way
CITY-ST-ZIP			CITY-ST-ZIP	Pensacola, FL
TITLE	TD HOWE, DAVID	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	7315 DU MONDE PLACE		NAME	TD J.J. Spence
STREET ADDRESS	PENSACOLA, FL 32505		STREET ADDRESS	7078 Rampart
CITY-ST-ZIP			CITY-ST-ZIP	Pensacola, FL 32505
TITLE	D HOLLOWAY, BARBARA	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	7060 RAMPART WAY		NAME	D Charlotte Barber
STREET ADDRESS	PENSACOLA, FL 32505		STREET ADDRESS	7178 Rampart Way
CITY-ST-ZIP			CITY-ST-ZIP	Pensacola, FL 32505
TITLE	PD ELLENBERGER, TED	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	6021 TOULOUSE DR		NAME	PD Prince Morris
STREET ADDRESS	PENSACOLA, FL 32505		STREET ADDRESS	6017 Toulouse Dr
CITY-ST-ZIP			CITY-ST-ZIP	Pensacola, FL 32505
TITLE	Roy Watson	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	6110 Arnaud Place		NAME	
STREET ADDRESS	Pensacola, FL 32505		STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: <i>Prince Morris</i>		Date: 4/30/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #		