

**2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A21000000625

**Entity Name:** THE MORGAN AT OCALA APARTMENTS LP

**Current Principal Place of Business:**

5501 WESCONNECT BLVD. 7933  
JACKSONVILLE, FL 32244-9908

**Current Mailing Address:**

P.O. BOX 7933  
JACKSONVILLE, FL 32244-9908

**FEI Number:** 87-3350373

**Certificate of Status Desired:** No

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

SNS MULTI FAMILY MANAGERMENTS LLC  
5501 WESCONNECT BLVD. 7933  
JACKSONVILLE, FL 32244-9908 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 #

Name THE MORGAN AT OCALA  
APARTMENTS GP LLC

Address 5501 WESCONNECT BLVD., 7933

City-State-Zip: JACKSONVILLE FL 32244-9908

*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:** SHAY MILECH

MGMR

01/16/2024

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

\_\_\_\_\_  
Date