

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42841

**FILED**  
**Feb 02, 2016**  
**Secretary of State**  
**CC8450488454**

**Entity Name:** MARTIN COMMONS PHASE TWO PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ROSS EARLE & BONAN, PA  
759 S FEDERAL HWY STE 212  
STUART, FL 34994

**Current Mailing Address:**

P.O. BOX 2401  
STUART, FL 34995

**FEI Number: 65-0336377**

**Certificate of Status Desired: No**

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

ROSS EARLE & BONAN, P.A.  
789 S FEDERAL HIGHWAY  
STE 101  
STUART, FL 34994 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

**Officer/Director Detail :**

Title           PRESIDENT, DIRECTOR  
Name           BERNSTEIN, CRAIG  
Address        4200 SUNDOWN LANE  
City-State-Zip: PALM CITY FL 34990

Title           SECRETARY, DIRECTOR  
Name           BUSHMAN, CRAIG  
Address        5654 SW MARTIN COMMONS WAY  
City-State-Zip: PALM CITY FL 34990

Title           VP, DIRECTOR  
Name           TYSINGER, CHARLES  
Address        5604 SW MARTIN COMMONS WAY  
City-State-Zip: PALM CITY FL 34990

Title           TREASURER, DIRECTOR  
Name           TERRIO, KAYCEE  
Address        5605 SW HONEY TER  
City-State-Zip: PALM CITY FL 34990

Title           DIRECTOR  
Name           BARKASZI, MARY JO  
Address        5556 SW HONEY TER  
City-State-Zip: PALM CITY FL 34990

*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: CRAIG BUSHMAN**

**SECRETARY, DIRECTOR   02/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date