

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

DOCUMENT# N97000001625

**FILED**  
**Apr 12, 2016**  
**Secretary of State**  
**CC0973973566**

**Entity Name:** THE COMMUNITIES AT MARCUS LAKE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

908 GARDENGATE CIRCLE  
PENSACOLA, FL 32504

**Current Mailing Address:**

908 GARDENGATE CIRCLE  
PENSACOLA, FL 32504

**FEI Number: 58-2385191**

**Certificate of Status Desired: No**

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

ETHERIDGE, RAY O  
908 GARDENGATE CIRCLE  
PENSACOLA, FL 32504 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  
Name           MORRIS, PRINCE  
Address        6017 TOULOUSE DRIVE  
City-State-Zip: PENSACOLA FL 32505

Title           VICE-PRESIDENT  
Name           WATSON, ROY  
Address        6110 ARNARD PLACE  
City-State-Zip: PENSACOLA FL 32505

Title           SECRETARY  
Name           ABNEY, MARIE  
Address        7199 RAMPART WAY  
City-State-Zip: PENSACOLA FL 32505

Title           DIRECTOR  
Name           STANTON, BROWNIE  
Address        7079 RAMPART WAY  
City-State-Zip: PENSACOLA FL 32505

Title           DIRECTOR  
Name           FERRY, CHUCK  
Address        7174 RAMPART WAY  
City-State-Zip: PENSACOLA FL 32505

Title           DIRECTOR  
Name           STEVENS, JUANITA  
Address        7022 RAMPART WAY  
City-State-Zip: PENSACOLA FL 32505

Title           DIRECTOR  
Name           FAILS, CRAIG  
Address        4052 EMBERS LANDING  
City-State-Zip: PENSACOLA FL 32505

*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: PRINCE MORRIS**

**PRESIDENT**

**04/12/2016**

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

\_\_\_\_\_  
Date