

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000000768

**Entity Name:** MARKER LAKE VILLAS NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Mar 26, 2019**  
**Secretary of State**  
**9660039245CC**

**Current Principal Place of Business:**

1016 COLLIER CENTER WAY  
SUITE 102  
NAPLES, FL 34110

**Current Mailing Address:**

1016 COLLIER CENTER WAY  
SUITE 102  
NAPLES, FL 34110 US

**FEI Number: 59-3564096**

**Certificate of Status Desired: No**

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

TOWNS, MICHAEL  
1016 COLLIER CENTER WAY  
SUITE 102  
NAPLES, FL 34110 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: MICHAEL TOWNS**

**03/26/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name SHIPMAN, FRAN  
Address 2158 STACIL CIRCLE  
City-State-Zip: NAPLES FL 34109

Title DIRECTOR  
Name TREATOR, SUSAN  
Address 2250 STACIL CIRCLE  
City-State-Zip: NAPLES FL 34109

Title P  
Name RICE, BARBARA  
Address 2158 STACIL CIRCLE  
City-State-Zip: NAPLES FL 34109

Title TREASURER  
Name VAN LOO, GWEN  
Address 2274 STACIL CIRCLE  
City-State-Zip: NAPLES FL 34109

Title VP  
Name MCCAULLEY, RICHARD  
Address 2234 STACIL CIRCLE  
City-State-Zip: NAPLES FL 34109

*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: FRAN SHIPMAN**

**SECRETARY**

**03/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date