


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # N13485 1. Entity Name HUNTER'S CREEK COMMUNITY ASSOCIATION, INC.	
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Principal Place of Business 14101 TOWN LOOP BLVD. ORLANDO, FL 32837 US	Mailing Address 14101 TOWN LOOP BLVD. ORLANDO, FL 32837 US
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01222008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2730786	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, ROBERT L
850 CONCOURSE PARKWAY SOUTH
SUITE 105
MAITLAND, FL 32751

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when renating)
Signature, typed or printed name of registered agent and title if applicable. DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SHIRK, DAVID
STREET ADDRESS	14101 TOWN LOOP BLVD.
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	DV
NAME	OVERBERGER, JOE
STREET ADDRESS	14101 TOWN LOOP BLVD.
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	D
NAME	FIELDS, JOHN
STREET ADDRESS	14101 TOWN LOOP BLVD.
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	DT
NAME	SCHWARTZ, C. EDWARD
STREET ADDRESS	14101 TOWN LOOP BLVD.
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	DS
NAME	HERRON, LIZZETTE
STREET ADDRESS	14101 TOWN LOOP BLVD.
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	D
NAME	ZEIG, PETER
STREET ADDRESS	14101 TOWN LOOP BLVD
CITY-ST-ZIP	ORLANDO, FL 32837

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IN THIS SPACE**

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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/08 407-851-5690
Date Daytime Phone