

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13485

**Entity Name:** HUNTER'S CREEK COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**14101 TOWN LOOP BLVD.  
ORLANDO, FL 32837**Current Mailing Address:**14101 TOWN LOOP BLVD.  
ORLANDO, FL 32837 US**FEI Number:** 59-2730786**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAYLOR & CARLS, P.A.  
150 N. WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714 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           OVERBERGER, JOE  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            DIRECTOR  
Name           ANDERS, BOB  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            VP  
Name           ZEIG, PETER  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            D  
Name           DEL PRINCE, DENNY  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            TREASURER  
Name           FIELDS, JOHN  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            SECRETARY  
Name           HERRON, LIZZETTE  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            D  
Name           SMITH, RHONDA  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

Title            D  
Name           SCHMIDT, DIANE  
Address        14101 TOWN LOOP BLVD.  
City-State-Zip: ORLANDO FL 32837

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*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:** JOE OVERBERGER**PRESIDENT****03/05/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	D
Name	MCDANIEL, LYNN
Address	14101 TOWN LOOP BLVD.
City-State-Zip:	ORLANDO FL 32837