

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28045

**FILED**  
**Mar 22, 2023**  
**Secretary of State**  
**1786197846CC**

**Entity Name:** HUNTER'S RESERVE MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O FIRST SERVICE RESIDENTIAL  
150 W. PALM VALLEY DR.  
OVIEDO, FL 32765

**Current Mailing Address:**

150 WEST PALM VALLEY DRIVE  
OVIEDO, FL 32765 US

**FEI Number: 59-3112830**

**Certificate of Status Desired: No**

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

WONSETLER, KAREN  
WONSETLER & WEBNER, P.A.  
860 N. ORANGE AVE. SUITE 135  
ORLANDO, FL 32801 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: KAREN WONSETLER**

**03/22/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            REGANTE, JILL  
Address        C/O FIRST SERVICE RESIDENTIAL  
                  150 W. PALM VALLEY DR.  
City-State-Zip: OVIEDO FL 32765

Title            SECRETARY  
Name            KNECHT, JOHN  
Address        C/O FIRST SERVICE RESIDENTIAL  
                  150 W. PALM VALLEY DR.  
City-State-Zip: OVIEDO FL 32765

Title            TREASURER  
Name            CILLI, DEBBIE  
Address        C/O FIRST SERVICE RESIDENTIAL  
                  150 WEST PALM VALLEY DRIVE  
City-State-Zip: OVIEDO FL 32765

Title            VICE  
Name            WILSON, KRISTINE  
Address        C/O FIRST SERVICE RESIDENTIAL  
                  150 W PALM VALLEY DRIVE  
City-State-Zip: OVIEDO FL 32765

Title            MEMBER AT LARGE  
Name            LOPEZ, VINCENT  
Address        C/O FIRST SERVICE RESIDENTIAL  
                  150 W PALM VALLEY DRIVE  
City-State-Zip: OVIEDO FL 32765

*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: JILL REGANTE**

**PRESIDENT**

**03/22/2023**

Electronic Signature of Signing Officer/Director Detail

Date