

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

DOCUMENT# N28045

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

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC3151466949**

**Current Principal Place of Business:**

C/O CONDOMINIUM CONCEPTS MNGT.  
150 W. PALM VALLEY DR.  
OVIDO, FL 32765

**Current Mailing Address:**

C/O CONDOMINIUM CONCEPTS MNGT.  
150 W. PALM VALLEY DR.  
OVIDO, FL 32765 US

**FEI Number: 59-3112830**

**Certificate of Status Desired: No**

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

CLAYTON & MCCULLOH  
1065 MAITLAND CTR COMMONS BLVD  
MAITLAND, FL 32751 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 DPT  
Name LUDAESHER, KAROL  
Address 164 RESERVE CIRCLE  
UNIT 112  
City-State-Zip: OVIDO FL 32765

Title DV  
Name BERRY, HELEN J  
Address 4901 SW 173RD WAY  
City-State-Zip: FT LAUDERDALE FL 33331

Title D  
Name LUDAESCHER, KAROL  
Address 164 RESERVE CIR #112  
City-State-Zip: OVIDO FL 32765

Title SD  
Name FISHMAN J, ACKIE-SUE  
Address 125 RESERVE CIR # 113  
City-State-Zip: OVIDO 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: KAROL LUDAESCHER**

**PRESIDENT**

**01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date