

028045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

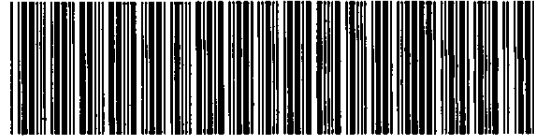
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 APR 26 P 12:53

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APR 28 2016

T. LEMMON



Clayton & McCulloh

ATTORNEYS AT LAW
www.clayton-mcculloh.com

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Clayton & McCulloh, P. A.
Servicing 25 Counties
Respond to: Orlando Office

April 6, 2016

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: *Hunter's Reserve Master Association, Inc.*

Dear Sir/Madam:

Enclosed please find the "**Statement of Change of Registered Office or Registered Agent or Both for Corporations**" for Hunter's Reserve Master Association, Inc. Also enclosed please find this firm's check in the amount of \$35.00 for the cost of filing such Statement.

Should you have any questions or require additional information, please feel free to contact me.

Sincerely,

CLAYTON & McCULLOH

Susan A. Roe
Florida Registered Paralegal
Enclosures
cc: Hunter's Reserve Master Association, Inc. (w/o encl.)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 11, 2016

CLAYTON & MCCULLOH
BAYTREE CORPORATE PARK
1341 BEDFORD DR STE A
MELBOURNE, FL 32940

SUBJECT: HUNTER'S RESERVE MASTER ASSOCIATION, INC.
Ref. Number: N28045

We have received your document for HUNTER'S RESERVE MASTER ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 716A00007400

RECEIVED
APR 26 AM 11:18
DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Hunter's Reserve Master Association, Inc.
2. The principal office address: c/o Condominium Concepts Mngt., 150 W. Palm Valley Dr.,
Oviedo, FL 32765
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 08/24/1988 Document number: N28045

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Hilliard, Jessica, c/o Condominium Concepts Mngt.

150 W. Palm Valley Dr.

Oviedo, FL 32765

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Russell E. Klemm, Esq.

1065 Maitland Center Commons Blvd.

P.O. Box NOT acceptable

Maitland, FL 32751

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Karol Ludascher
Signature of an officer or director

KAROL LUDASCHER, PRES.
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Russell E. Klemm
Signature of Registered Agent

Date

4/22/16

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)