### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007044

Entity Name: VISCONTI MASTER ASSOCIATION, INC.

FILED
Jan 25, 2016
Secretary of State
CC0322572006

## **Current Principal Place of Business:**

VISCONTI MASTER ASSOCIATION C/O FIRSTSERVICE RESIDENTIAL 2000 LEGACY CLUB DRIVE MAITLAND, FL 32751

# **Current Mailing Address:**

VISCONTI MASTER ASSOCIATION C/O FIRSTSERVICE RESIDENTIAL 2000 LEGACY CLUB DRIVE MAITLAND, FL 32751 US

FEI Number: 20-3292958 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

PAUL T. HINCKLEY ATTORNEY AT LAW 37 N. ORANGE AVE SUITE 500 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 ANDERSON 01/25/2016

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title PRESIDENT Title VF

NameANDERSON, KARENNameFOWLER, MICHAELAddress2000 LEGACY CLUB DRIVEAddress2000 LEGACY CLUB DRCity-State-Zip:MAITLAND FL 32751City-State-Zip:MAITLAND FL 32751

Title TREASURER/SECRETARY Title DIRECTOR

Name MARUKYAN, ARMAN Name AZCIOTIA, DIANA

Address 2000 LEGACY CLUB DR Address 2000 LEGACY CLUB DR
City-State-Zip: MAITLAND FL 32751 City-State-Zip: MAITLAND FL 32751

Title DIRECTOR

Name NOSSE, ANTHONY
Address 2000 LEGACY CLUB DR
City-State-Zip: MAITLAND FL 32751

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: KAREN ANDERSON PRESIDENT 01/25/2016