## 73/325

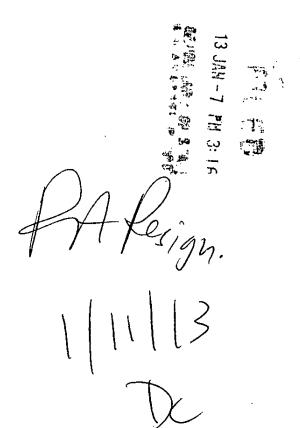
•				
(Requestor's Name)				
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PICK-UP WAIT MAIL				
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJI	
	(Name of Corporation)
DOCU	JMENT NUMBER: 731325
The en	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Joe Paladino, Records Administrator
	(Name of Person)
	Sentry Management, Inc.
	(Name of Firm/Company)
	2180 W. State Road 434, Suite 5000
	(Address)
	Longwood, FL 32779-5044
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
	Joe Paladino at ( 407 ) 788-6700 ext. 239  (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose or \$35.	ed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amend Divisio Clifton 2661 E	Address: Iment Section In of Corporations Building Secutive Center Circle Insee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

CR2E046(08/05)

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 61	7.1509,
Florida Statutes, the undersigned,	James W. Hart, Jr.	
·	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Condominium Number 5 of Beacon I	Lakes, Incorporated
	(Name of Corporation)	
731325		
(Document Number, if known)	Control Contro	
A copy of this resignation was mailed to	o the above listed corporation at its last kn	nown address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the dat	e on which
K	gnature of Resigning Agent)	_
230	grantie of Resigning Agent)	
If signing on behalf of an entity:		
Ser	ntry Management, Inc.	<u> </u>
(	Typed or Printed Name)	
	President	
	(Capacity)	• w -

## Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314