746669

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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SECRETARY OF STATE
TALL AHASSEE FLORIDA



COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: WOODLAND VILLAGE CONDOMINIUM ASSOCIATION INC
	(Name of Corporation)
DOC	UMENT NUMBER: 746669
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Ryan Pasternak, Records Administrator
	(Name of Person)
	Sentry Managemenet, Inc.
	(Name of Firm/Company)
	2180 W. State Road 434, Suite 5000
	(Address)
	Longwood, Fl 32779-5044
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
	Ryan Pasternak at (407) 788-6700 ext. 227 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo or \$35	sed 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of State for \$87.50 for an active corporation .00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amen Divisi Clifto 2661	Address: dment Section on of Corporations n Building Executive Center Circle assee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	James W. Hart, Jr.
	(Name of Registered Agent)
hereby resigns as Registered Agent for	WOODLAND VILLAGE CONDOMINIUM ASSOÇIATIO
746669	(Name of Corporation)
(Document Number, it known)	
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
(হা	gnature of Resigning Agent)
If signing on behalf of an entity:	
	ntry Management, Inc.
(^	Typed or Printed Name)
	President SS
	(Capacity)
	SIA II

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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