## N0400010425

## SENTRY Management<sub>ing.</sub>

2180 W State Road 434 Ste 5000 Longwood FL 32779-5044

(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	provisions of sections 607.0502	2, 617.0502, 607.1508 <b>,</b>	, or 617.1508, F	lorida Statu	ites,
this statement of	change is submitted for a corpo	ration organized under	the laws of the S	State of	
FLORIDA	in order to change its reg	istered office or regist	ered agent, or bo	oth, in the S	tate
of Florida.					
1. The name of t	he corporation: BELLASOL CO	NDOMINIUM 6 ASSOC	CIATION, INC.		
2. The principal	office address: 2180 W SR 43	4 STE 5000			
	LONGWOOD FL	32779-5044			
3. The mailing a	ddress (if different):				-
4. Date of incorp	oration/qualification: 11/05/2	004 Docume	nt number: N040	00010425	
	street address of the current regitment of State:	istered agent and regist	ered office on fil		-7
	BOLANOS TRUXTON, PA			IAN 13	200
	12800 UNIVERSITY DRIVE S				
	FORT MYERS EL 33907		· · · · · · · · · · · · · · · · · · ·	IOR STA	
<ol><li>The name an changed):</li></ol>	d street address of the new reg	istered agent (if chang	ged) and /or regis	særed office	e (if
	JAMES W HART JR				
	SENTRY MANAGEMENT	INC			
-	(P.O. Box or persons 2180 W SR 434 STE LONGWOOD FL 32779	al mailbox NOT acceptable) 5000 -5044			
The street addre	ss of its registered office and the dwill be identical.	e street address of the	business office o	f its register	red
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	Clarice	( anshe)	an officer so <u>Prot</u> k	_
(Signature of an officer,	chairman or vice chairman of the board)		yped name and title)	,	
I jurther agree t performance of registered agen	the appointment as registered a o comply with the provisions of my duties, and I am familiar wi t. Or, if this document is being j hereby confirm that the corpor	an statutes relative to th and accept the oblig filed merely to reflect t	the proper and c gation of my posi a change in the r	tion as egistered	
<u> </u>	gnature of Registered Agent)	1-5-	(Date)	<del></del>	
If signing on behal	• • •		•		
JAMES W HA	•		PRESIDENT		
	vped or Printed Name)		(Capacity)		

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