N05000008195

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	<u> </u>
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COVER LETTER

HRIECT.	VILLAS AT ESTANCIA CONDOMINIUM ASSOCIATION INC
JOBJEC I.	(Name of Corporation)
DOCUMEN	NT NUMBER: N05000008195
The enclosed	d 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)
2	180 W. State Road 434, Suite 5000
	(Address)
	Longwood, Fl 32779-5044
	(City/State and Zip Code)
For further is	nformation 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)

n

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509	, or 617.1509,
Florida Statutes, the undersigned,	James W. Hart, Jr.	
	(Name of Registered Age	
hereby resigns as Registered Agent for	VILLAS AT ESTANCIA COND	OMINIUM ASSOCIATION INC
	(Name of Corporation)	
N05000008195		
(Document Number, if known)		
A copy of this resignation was mailed t	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
	gnature of Resigning Agent)	
If signing on behalf of an entity:		SEC TALE
Se	ntry Management, Inc.	AHE JAN TI
	(Typed or Printed Name)	SSE -4
	President	ED PH :
	(Capacity)	- <u>Β</u> Ε ω

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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