

N95000004218

Requestor's Name

**SENTRY  
management** INC.

2180 State Road 434 W Ste 5000  
Longwood FL 32779-5044  
SENTRY 100000  
RETURN SERVICE REQUESTED

800002947788--4  
-08/02/99--01124--018  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Office Use Only

BER(S), (if known):

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in
- Mail out
- Pick up time \_\_\_\_\_
- Will wait
- Photocopy
- Certified Copy
- Certificate of Status

FILED  
99 AUG -6 PM 1:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

N95000004218  
8-6-99  
RARS  
2M

Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

**RESIGNATION OF REGISTERED AGENT**

Pursuant to the provisions of sections 607.0502(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 WELLINGTON CHASE HOMEOWNERS ASSOCIATION, INC.  
(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

[Signature]  
(Signature of resigning agent)

If signing on behalf of an entity:

SENTRY MANAGEMENT, INC.  
(Typed or Printed Name)

PRESIDENT  
(Capacity)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

**Fee for filing this document:**  
\$87.50 - Active corporation  
\$35.00 - Administratively dissolved corporation