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SEP 3 0-485

## **COVER LETTER**

	Amendment Section Division of Corporations	
SUBJE	ECT: DEERFIELD PLACE HOMEOWNERS ASSOCIATION, INC.	
	(Name of Corporation)	
DOCUN	JMENT NUMBER:_ N0400000728	
The enc	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing	g.
Please re	return all correspondence concerning this matter to the following:	
CHRIS	IS BROWNE, CENTRAL SERVICES SUPERVIS	
	(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 furth	ther information concerning this matter, please call:	
CHRIS	S BROWNE at (407) 788-6700 ext. 237 (Name of Person) (Area Code & Daytime Telephone Number)	
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed or \$35.0	ed is a check made payable to the Florida Department of State for \$87.50 for an active co.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.	orporation
Amendm Division Clifton E 2661 Exe	Address: Idment Section On of Corporations Building Executive Center Circle assee, 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 617.150	)9,		
Florida Statutes, the undersigned,	James W. Hart, Jr. (Name of Registered Agent)	<del></del>		
hereby resigns as Registered Agent for	DEERFIELD PLACE HOMEOWNERS AS (Name of Corporation)	SSOCIA,TIC	ON, II	NC.
N0400000728				
(Document Number, if known)	_			
A copy of this resignation was mailed to	o the above listed corporation at its last known	address.		
this statement is filed.	discontinued on the 31st day after the date on gnature of Resigning Agent)	SECRETARY OF ALLAHASSEE, F	13 SEP 23 AH 9:	APPROVED AND FILED
Se	ntry Management, Inc.	STATE LORIDA	42	
	Typed or Printed Name)			
	President			
· · · · · · · · · · · · · · · · · · ·	(Capacity)			

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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