M0400009323

(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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AND AND FILED



COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: WOODLAND LAKES PRESERVE HOMEOWNERS ASSOCIATION INC (Name of Corporation)
• • •
DOCUMENT NUMBER: N0400009323
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NICHOLAS REED, RECORDS ADMINISTRATOR
(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 further information concerning this matter, please call:
NICHOLAS REED at (407) 788-6700 ext. 44601
NICHOLAS REED at (407) 788-6700 ext. 44601 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Street Address:Mailing Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsClifton BuildingPost Office Box 63272661 Executive Center CircleTallahassee, FL 32314
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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 613	7.1509,	
Florida Statutes, the undersigned,	James W. Hart, Jr.		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	WOODLAND LAKES PRESERVE HOMEOWNERS ASSOCIATION (Corporation)		
N0400009323			
(Document Number, if known)	_		
A copy of this resignation was mailed to	o the above listed corporation at its last known	own address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date	e on which	
(Sig	nature of Resigning Agent)		
If signing on behalf of an entity:			
Ser	ntry Management, Inc.		
(**	Typed or Printed Name)	750 <u>-</u>	
	President	FIL 4 DEC 18 ECRETAR LLAHASSI	
	(Capacity)	FILI FILI II8 ARY SSE	
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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\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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