## 767258

(Re	equestor's Name)	
(Ad	idress)	·
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

Date: 03/31/2020

TO: Amendment Section Division of Corporations
SUBJECT: VILLAS OF SOMERSET WOODS CONDOMINIUM ASSOCIATION, IN (Name of Corporation)
DOCUMENT NUMBER: 767258
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:
RAE ANN PARKER, 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:
RAE ANN PARKERat (407) 788-6700 ext. 22300
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:
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

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 617.15	09.
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC	
ç <u> </u>	(Name of Registered Agent)	
hereby resigns as Registered Agent for	VILLAS OF SOMERSET WOODS CONDOMINIUM	•
waren jarrang marang	(Name of	Corporation)
767258		
(Document Number, it known)		
A copy of this resignation was mailed t	to the above listed corporation at its last known	i address.
this statement is filed.	ignature of Resigning Age (1)	which  Ji CRI II  Ji VISION 0  7021 MAR
If signing on behalf of an entity:		30
Bradley Pomp, or	n behalf of, Sentry Management, Inc.	7 2.0
	(Typed or Printed Name)	PH 12: 58
	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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, F1, 32314