748873

. (Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
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SECRETARY OF STATE

C.COULLIETTE MAR 2 6 2009

EXAMINER

COVER LETTER

	Amendment Section Division of Corporations
SUBJE	CT: Wood Trail Condominium Association, Inc.
CODOL	(Name of Corporation)
DOCU	MENT NUMBER: 748873
The end	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
	Joe Paladino, Central Services Supervisor
	(Name of Person)
	Sentry Managemenet, Inc.
	(Name of Firm/Company)
	2180 W. State Road 434, Suite 5000
	(Address)
	Longwood, FI 32779-5044
	(City/State and Zip Code)
For furt	ther information concerning this matter, please call:
·	Joe Paladino at (407) 788-6700 ext. 227
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections of	07.0502(2), 617.0502(2), 607.1509, or 61.	7.1309,
Florida Statutes, the undersigned,	Jeffrey Ulm	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Wood Trail Condominium Association	n, Inc.
nervoy resigns as registered regent to:	(Name of Corporation)	 ;
748873		
(Document Number, if known)	_	
A copy of this resignation was mailed to	the above listed corporation at its last kn	own address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date	e on which
1//2	Wh	_
///(Sig	gnature of Resigning Agent)	
If signing on behalf of an entity:	·	
,	-	TA _S
	Jeffrey Ulm	O9 MAR 23 SECRETARY LLAHASSE
	Typed or Printed Name)	TAR TAR
		SS SS
	President/Agent	E P P
	(Capacity)	SIA LOR

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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