754591

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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2019 SEP 30 AM 8: 38

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COVER LETTER

Date: 9/30/2019 TO: Amendment Section **Division of Corporations** SUBJECT: SUNSHINE ON INDIAN SHORES CONDOMINIUM ASSOCIATION, INC. (Name of Corporation) DOCUMENT NUMBER: 754591 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 PARKER at (407) 788-6700 ext. 44601 (Area Code & Daytime Telephone Number) (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

rursuant to the provisions of sections of	07.0302(2), 617.0302(2), 607.130	9. 01 017.1309,	
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC		
	(Name of Registered Ag	(ent)	
hereby resigns as Registered Agent for	SUNSHINE ON INDIAN SHORES CONDOMINIUM		
	ASSOCIATION, INC.	(Name of Corporation)	
754591			
(Document Number, if known)	-		
A copy of this resignation was mailed to	the above listed corporation at it	s last known address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day afte		
If signing on behalf of an entity:	-	2019 SEP 30 AP	
Bradley Pomp, or	behalf of, Sentry Managemen	it, Inc. 30 - 3	
(Typed or Printed Name)		
	President	8:38	
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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