758934

(Requestor's Name)
(Address)
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SECRETARY OF STATE
TALLAHASSEE, FIORID

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COVER LETTER

Division of Corpora	tions				
SUBJECT:	Water Oak Homeo	wners Ass	sociation, Inc) .	
	(Name of	f Corporatio	n)		
DOCUMENT NUMBER:	7:	58934		····	
The enclosed Resignation o	f Registered Agent for	a Corporat	ion and fee a	e submitted	for filing.
Please return all correspond	ence concerning this m	atter to the	following:		
Joe Paladino, Re	cords Administrator				•
(Nam	e of Person)				
Sentry Ma	anagement, Inc.				
(Name of	Firm/Company)				
2180 W. State	Road 434, Suite 500	0			
(A	(ddress)				
Longwood	FL 32779-5044				
(City/State	e and Zip Code)				
For further information con-	cerning this matter, ple	ase call:			
Joe Palad	at (788-6700		
(Name of Per	son) (A	Area Code &	¿ Daytime Tel	ephone Numb	er)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60'	7.0502(2), 617.0502(2), 607.1509, or 617.1509,				
Florida Statutes, the undersigned,	James W. Hart, Jr.				
	(Name of Registered Agent)				
hereby resigns as Registered Agent for _	Water Oak Homeowners Association, Inc.				
	(Name of Corporation)				
758934					
(Document Number, if known)	_				
A copy of this resignation was mailed to	the above listed corporation at its last known address	S.			
The agency is terminated and the office of this statement is filed.	liscontinued on the 31st day after the date on which				
	SECA SECA	1			
(Sign	nature of Resigning Agent)	FEB III			
If signing on behalf of an entity:		A D			
Sent	try Management, Inc.	**			
(T)	yped or Printed Name)	5			
•	President				
	(Caracity)				

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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