770412

(D.		
(RE	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	· #)
_		_
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
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(Do	cument Number)	· · ·
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COVER LETTER

Division of Corporations	
SUBJECT: Governors Point Townhomes Homeown	ers' Association West, Inc.
(Name of Corpora	tion)
DOCUMENT NUMBER: 770412	
The enclosed Resignation of Registered Agent for a Corpo	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Joe Paladino, 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:	
Joe Paladino at (407	788-6700 ext. 227
(Name of Person) (Area Cod	e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO: Amendment Section

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 60	07.0502(2), 617.0502(2), 607.1509, or 617.13	509,
Florida Statutes, the undersigned,	James W. Hart, Jr.	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Governors Point Townhomes Homeowr	ners' Association
	(Name of Corporation)	
770412	West, Inc.	
(Document Number, if known)		
A copy of this resignation was mailed to	the above listed corporation at its last know	n address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date of	n which 09 OEC
If signing on behalf of an entity:	ghature of Resigning Agent)	FHLED 21 PM 12: 03 ANT OF STATE SSEE, FLORIDA
Ser	ntry Management, Inc.	別所に
(*	Typed or Printed Name)	
	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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, FL 32314