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## **COVER LETTER**

Date: 12/29/2017

Amendment Section TO: Division of Corporations SUBJECT: BAC BAY HEALTH AND RACQUET CLUB CONDOMINIUM ASSOCIATION, INC. (Name of Corporation) DOCUMENT NUMBER: 770823 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:

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or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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: Mailing Address:
Amendment Section Amendment Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

(Name of Person)

CR2E046(08/05)

RAE ANN PARKER

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 6	517.1509,
Florida Statutes, the undersigned,	SENTRY MANAGEME	NT INC
	(Name of Registered Agent)	<del></del>
hereby resigns as Registered Agent for	BAC BAY HEALTH AND RACQUE ASSOCIATION (Not Corporation)	T CLUB CONDOMINIUM
770823		
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed t	o the above listed corporation at its last l	known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the d	ate on which
		72 70 70
	gnature of Besigning Agant)	
(41)	gnature of Besigning Agant)	7 7
If signing on behalf of an entity:		A A
Sei	ntry Management, Inc.	AH III S
	Typed or Printed Name)	Garage T
	President	
<del>-</del>	(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Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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