N01000003465

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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SECHETARY OF STATE
TALL AHASSEE, FLORID

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Danforth La	skes Homeowners' Association, Inc.
	(Name of Corporation)
DOCUMENT NUMBER:	N0100003465
The enclosed Resignation of Regist	ered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence co	ncerning this matter to the following:
Joe Paladino, Records A	dministrator
(Name of Pers	on)
Sentry Managem	ent, Inc.
(Name of Firm/Co	npany)
2180 W. State Road 4	34, Suite 5000
(Address)	
Longwood, FL 32	79-5044
(City/State and Zip	Code)
For further information concerning	his 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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DESIGNATIO	ON OF REGISTERED AGENT TO OFCE
	A CORPORATION
	ON OF REGISTERED AGENT 10 OEC 20 PM 1:53
Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509, Explanation
Florida Statutes, the undersigned,	James W. Hart, Jr.
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Danforth Lakes Homeowners' Association, Inc.
, , ,	(Name of Corporation)
N0100003465	
(Document Number, if known)	
A copy of this resignation was mailed to	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which
	4
(Si	gnature of Resigning Agent)
If signing on behalf of an entity:	
Ser	ntry Management, Inc.
(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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