N0100000 5456

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FILED Feb 06, 2023 08:00 AM Secretary of State

RA Rosignation

APR 1 1 2023

D CUSHING

COVER LETTER

TO:	Amendment Section Division of Corporations	Date: 12/31/2022
SUBJ	ECT: ST. MORITZ RESIDENTS' ASSOCIATI	ON, INC.
	(Name of Corporation	on)
DOC	UMENT NUMBER:N0100008456	
The e	nclosed Resignation of Registered Agent for a Corpora	tion and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the	e following:
RAE	E ANN PARKER, RECORDS ADMINISTRATOR	
	(Name of Person)	
	Sentry Management, Inc.	FILED
	(Name of Firm/Company)	Feb 06, 2023 08:00 AM
	2180 W. State Road 434, Suite 5000	Secretary of State
	(Address)	
	Longwood, FL 32779-5044	
	(City/State and Zip Code)	
For fu	orther information concerning this matter, please call:	
RAE	ANN PARKER at (407 (Name of Person) (Area Code)	788-6700 ext. 22300 & Daytime Telephone Number)
Enclo or \$35	sed is a check made payable to the Florida Department 5.00 for an administratively dissolved, voluntarily disso	of State for \$87.50 for an active corporation lived or withdrawn corporation.
Amen Divisi Clifto 2661	t Address: dment Section ion of Corporations n Building Executive Center Circle nassee, FL 32301	

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 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.	SENTRY MANAGEMENT INC
	(Name of Registered Agent)
hereby resigns as Registered Agent for	ST. MORITZ RESIDENTS' ASSOCIATION, INC.
	(Name of Corporation)
N01000008456	
(Document Number, if known)	
A copy of this resignation was mailed t	o the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on which
	FILED
	Feb 06, 2023 08:00 AM
(Si	gnature of Resigning Agent) Secretary of State
If signing on behalf of an entity:	
Bradley Pomp, or	n behalf of, Sentry Management, Inc.
1	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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