NOZ000007470

(Re	questor's Name)		
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ALLAHASSEE, FLORIDA

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12-20-10

DEC 20 P 1: 05

COVER LETTER

SUBJECT: Tradd's t	_anding Homeowners Association, Inc.
	(Name of Corporation)
DOCUMENT NUMBER:	N02000007470
The enclosed Resignation of Regis	stered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence c	oncerning this matter to the following:
Joe Paladino, Records	Administrator
(Name of Per	rson)
Sentry Manage	ment, Inc.
(Name of Firm/C	Company)
2180 W. State Road	434, Suite 5000
(Address)
Longwood, FL 32779-5044	
(City/State and Zip Code)	
For further information concerning	g this matter, please call:
Joe Paladino (Name of Person)	at (407) 788-6700 ext. 227 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

TO:

Amendment Section Division of Corporations

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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	ON OF REGISTERED AGENT A CORPORATION	TAILED TAILED TAILED TAILED TAILED TAILED TO POST TO THE TAILED TO THE T
Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 61	7.1509, 1.05
Florida Statutes, the undersigned,	James W. Hart, Jr. (Name of Registered Agent)	- FLORICA
hereby resigns as Registered Agent for	Tradd's Landing Homeowners Associ	ciation, Inc,
N02000007470		
(Document Number, if known)		
A copy of this resignation was mailed to	the above listed corporation at its last kn	own address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date	e on which
(81 <u>8</u>	gnature of Resigning Agent)	-
If signing on behalf of an entity:		
Ser .	itry 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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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