NOZ 000009588

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

Date:	2/29/2020
Dan.	414314040

TO: Amendment Section Division of Corporations SUBJECT: HOMEOWNERS ASSOCIATION OF WELLINGTON PLACE AT DUNEDIN, INC. (Name of Corporation) DOCUMENT NUMBER:_N02000009588 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: at (407) 788-6700 ext. 22300 (Area Code & Daytime Telephone Number) RAE ANN PARKER (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 6	.07.0502(2), 617.0502(2), 607.1509, or 617	7.1509,	
Florida Statutes, the undersigned.	SENTRY MANAGEMEN	TINC	
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	HOMEOWNERS ASSOCIATION OF WELLINGTON PLACE AT DUNEDIN, INC		
	(Nam	e of Corporation)	
N02000009588			
(Document Number, if known)			
A copy of this resignation was mailed t	o the above listed corporation at its last kn	own address.	
this statement is filed.	e discontinued on the 31st day after the date	e on which	
If signing on behalf of an entity:			
Bradley Pomp, or	n behalf of, Sentry Management, Inc.	20 0	
	(Typed or Printed Name)	7020 HAS	
	President	5 5	
	(Capacity)	PH 2: 5	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

\$35.00 - Administratively dissolved/voluntarily dissolved/

Fee for filing this document: \$87.50 - Active corporation

withdrawn corporation