## N03000002776

(Re	questor's Name)			
(Ad	dress)			
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(Ad	dress)			
(Cit	:y/State/Zip/Phone	#)		
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ie)		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations						
SUBJECT: The Greens at Sumi	nertree Homeo	wners As	sociation, Ir	nc.		
-	(Name of C	Corporation	)		_	
DOCUMENT NUMBER:	N03000	002776				
The enclosed Resignation of Regist	ered Agent for a	Corporation	on and fee ar	e submitted fo	or filing.	
Please return all correspondence co	ncerning this ma	tter to the	following:		75 <b>3</b>	
Joe Paladino, Central Services Supervisor			ES 3			
(Name of Pers	son)				09 APR 23 SECRLIAR TALLAHASS	=
Sentry Manager	nenet, Inc.				AM 10: 15	FILED
(Name of Firm/Co	ompany)				ESI 🙃	
2180 W. State Road 4	34, Suite 5000				SEE 5	
(Address)					-	
Longwood, Fl 327	79-5044					
(City/State and Zi	p Code)					
For further information concerning	this matter, pleas	se call:				
Joe Paladino	ai (	407 <sub>)</sub>	788-6700		_	
(Name of Person)	(A:	rea Code &	Daytime Tele	phone 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.	.1509,		
Florida Statutes, the undersigned,	James W. Hart, Jr. (Name of Registered Agent)			
hereby resigns as Registered Agent for	TI 0 10 11 11 11 11 11 11 11 11 11 11 11 1			
N03000002776				
(Document Number, if known)	<del>_</del>			
A copy of this resignation was mailed to	the above listed corporation at its last kno	own address.		
this statement is filed.	discontinued on the 31st day after the date	FILE 09 APR 23 SECRETARY TALLAHASSE		
If signing on behalf of an entity:	ntry Management, Inc.	AM 10: 15 OF STATE E, FLORIDA		
	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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