N04000006128

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) " Certified Copies Certificates of Status Special Instructions to Filing Officer:			
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COVER LETTER

Date: 12/31/2020

TO: Amendment Section Division of Corporations
SUBJECT: ALAFAYA RETAIL PARK (SOUTH) PROPERTY OWNERS ASSOCIATION, INC
(Name of Corporation)
DOCUMENT NUMBER: N04000006128
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:
RAE ANN PARKER at (407) 788-6700 ext. 22300 (Area Code & Daytime Telephone Number)
(Maine of Ferson) (Med Code to Editine Fersons Frances)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 617.1509.		
Florida Statutes, the undersigned.	SENTRY MANAGEMENT INC		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	ALAFAYA RETAIL PARK (SOUTH) PROPERTY OWNERS ASSOCIATION, INC		
nerely resigns as registered rigent for	(Name of Cor	poration)	
N0400006128			
(Document Number, if known)			
A copy of this resignation was mailed t	o the above listed corporation at its last known ac	ldress.	
this statement is filed.	e discontinued on the 31st day after the date on when the date on the date of the date on the date of th	nich	
If signing on behalf of an entity:			
Bradley Pomp, o	n behalf of, Sentry Management, Inc.	297	
	(Typed or Printed Name)	2929 DEC 114	
	President		
	(Capacity)	A	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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