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R. WHITE

COVER LETTER

(Nan	ne of Corporation)
DOCUMENT NUMBER: N05000000194	
The enclosed Resignation of Registered Agent	for a Corporation and fee are submitted for filing
Please return all correspondence concerning th	is matter to the following:
CHRIS BROWNE, CENTRAL SERVICES	S SUPERVIS
(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:
CHRIS BROWNE	rt (407) 788-6700 ext. 237 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

Mailing Address:
Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

1,, ?

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.150	9, or 617.1509,
Florida Statutes, the undersigned,	James W. Hart, Jr.	
	(Name of Registered Ag	
hereby resigns as Registered Agent for	CAPRIANA CONDOMINIUM	OWNERS ASSOCIATION, INC.
, , ,	(Name of Corporation	n)
N05000000194		
(Document Number, if known)		
A copy of this resignation was mailed to	o the above listed corporation at it	ts last known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day afte	r the date on which
(Signature)	gnature of Resigning Agent)	13 FAL
If signing on behalf of an entity:	_	PEC - 230 LAHAS
	ntry Management, Inc.	
(Typed or Printed Name)	FLORE :
	President	36 IE

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)