## N05000004846

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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Ventura at Stonebridge Commons Condominium Association, Inc. (Name of Corporation)	<u>.                                    </u>		
DOCUMENT NUMBER: N05000004846			
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted	d for fil	ing.	
Please return all correspondence concerning this matter to the following:			
Joe Paladino, Central Services Supervisor  (Name of Person)			
Sentry Managemenet, Inc.	11V.	80	,
(Name of Firm/Company)		MAY	1
2180 W. State Road 434, Suite 5000		5	F
(Address)		3	
Longwood, Fl 32779-5044		က က	
(City/State and Zip Code)	<u>⊃</u>	4	
For further information concerning this matter, please call:			
Joe Paladino at (407) 788-6700 ext. 227 (Name of Person) (Area Code & Daytime Telephone Num	iber)		

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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	Ventura at Stonebridge Commons	Condominium	Association,	Jac.
	Inc. (Name of Corporation)			
N05000004846				
(Document Number, if known)	_			
A copy of this resignation was mailed to	the above listed corporation at its last	known address.		
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the c	late on which		
	4-	OB MAY YECRE! ALI AHI	77]	
If signing on behalf of an entity:	gnature of Resigning Agent)	ASSEE.		
Ser	ntry Management, Inc.	STAI FLORII		******
(	Typed or Printed Name)		r	
	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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