N05000010596

(Re	equestor's Name)		
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	#)	
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TALLAHASSEE, FLORIDA

SEP 1 1 2014 T. CARTER

RA Resign

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: BRENTWOOD LAKES PROPERTY OWNERS ASSOCIATION INC
	(Name of Corporation)
DOC	UMENT NUMBER: N05000010596
The en	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
NIC	HOLAS REED, 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 fu	orther information concerning this matter, please call:
NICH	AOLAS REED at (407) 788-6700 ext. 44601 (Name of Person) (Area Code & Daytime Telephone Number)
Enclos or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 5.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amen Division Clifton 2661 I	Mailing Address: dment Section on of Corporations n Building Executive Center Circle passee, 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,	James W. Hart, Jr. (Name of Registered Agent)		
hereby resigns as Registered Agent for	PDENTINOOD LANCO PROPERTY OWNERS		
N05000010596			
(Document Number, if known)			
A copy of this resignation was mailed to	o the above listed corporation at its last kno	own address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date	on which	
	gnature of Resigning Agent)		
	gnature of Resigning Agent)		
If signing on behalf of an entity:		ŠE TAL	
	ntry Management, Inc.	CRETAR LAHASS SEP -2	
C	Typed or Printed Name)	₩ -	
	President	PM 1:0	
	(Capacity)	_ 등품	

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withdrawn corporation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