N25995

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
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RA Resign





COVER LETTER

Division	of Corporations
SUBJECT:	Northlake Village VIII Condominium Association, Inc.
	(Name of Corporation)
DOCUMENT N	NUMBER: N25995
The enclosed Re	signation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all	correspondence concerning this matter to the following:
Joe Pai	ladino, Records Administrator
	(Name of Person)
	Sentry Management, Inc.
	(Name of Firm/Company)
2180	W. State Road 434, Suite 5000
	(Address)
L	ongwood, FL 32779-5044
-	(City/State and Zip Code)
For further inform	nation concerning this matter, please call:
	Joe Paladino at (407) 788-6700 ext. 227
7)	Name of Person) (Area Code & Daytime Telephone 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ON OF REGISTERED AGENT A CORPORATION O7.0502(2), 617.0502(2), 607.1509, or 617.1509, HASSEL AGENT James W. Hart, Jr. (Name of Registered Agent)
Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.1509, 1/4 617
Florida Statutes, the undersigned,	James W. Hart, Jr. (Name of Registered Agent)
hereby resigns as Registered Agent for	Northlake Village VIII Condominium Association, Inc.
N25995	
(Document Number, if known)	-
	discontinued on the 31st day after the date on which
If signing on behalf of an entity:	nature of Resigning Agent)
Sen	try Management, Inc.
(1)	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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