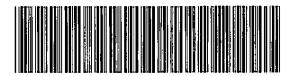
# N99000007448

(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:

Office Use Only



700370493127

07/24/21 - 01018 - 020 - \*\*87.50

2021 JUL 29 PH 3: 41
SEPH DINKSEE, FIL



### **COVER LETTER**

Date: 07/31/2021

Division of Corporations
SUBJECT: BAYSHORE PALMS HOMEOWNERS ASSOCIATION, INC. (Name of Corporation)
OOCUMENT NUMBER: N99000007448
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filin
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 <u>at ( 407 ) 788-6700 ext. 22300</u>
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO: Amendment Section

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 (	507.0502(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	BAYSHORE PALMS HOMEOWNERS ASSOCIATION, INC
	(Name of Corporation)
N9900007448	
(Document Number, if known)	<del></del>
A copy of this resignation was mailed	to the above listed corporation at its last known address.
this statement is filed.	ignature of Respecting Agent)
If signing on behalf of an entity:	
	n behalf of, Sentry Management, Inc.  (Typed or Printed Name)
	(Typed or Printed Name)
	(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