136563

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SECRETARY OF STATE
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Mrs. J

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Bedford At The Lakes Homeowners Association, Inc. (Name of Corporation)				
DOCUMENT NUMBER: N36563				
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Carmen Sierr	a			
(Name of Contact Person)				
Becker & Poliakoff, P.A.				
(Firm/Company)				
1850 Fountainview Blvd. Suite 103 (Address)				
(Address)				
Port St. Lucie, FL 34986 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Carmen Sierra at (at (772) 871-9320 Area Code & Daytime Telephone Number)			
(Name of Contact Person) (A	Area Code & Daytime Telephone Number)			
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Sta ange is submitted for a corporation organized under the laws of the State of Flo er to change its registered office or registered agent, or both, in the State of Flo	orida		
1. The name of	the corporation: Bedford At The Lakes Homeowners Association.	nc.		
2. The principal	l office address: 113 NW Bentley Circle			
	Port St. Lucie, FL 34986			
3. The mailing a	address (if different):			
4. Date of incorp	rporation/qualification: 02/12/1990 Document number: N36563			
	d street address of the current registered agent and registered office on file with artment of State: (If resigned, enter resigned)	the		
	Becker & Poliakoff, P.A.			
	c/o Mary Harvey, Esq. 1850 Fountainview Blvd. Suite 103			
	Port St. Lucie, FL 34986	SECF	2008 D	erg:
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	RETARY	2008 DEC 22	- C
	Becker & Poliakoff, P.A.	in of	PH	
	c/o Kenneth S. Direktor, Esq. 1850 Fountainview Blvd. Suite 103	LOA STA	=	C
	(P.O. Box NOT acceptable)	E A	20	
	Port St. Lucie, FL 34986	,		
The street address changed will	ress of its registered office and the street address of the business office of its ill be identical.	egisterec	l agent,	
Such change w authorized by t	was authorized by resolution duly adopted by its board of directors or by an o the board, or the corporation has been notified in writing of the change.	fficer so		
(Signat	sture of an officer or director) (Printed or typed name and title	e)		
I furthér agrée of my duties, ar document is he	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and compound I am familiar with and accept the obligation of my position as registered less filed merely to reflect a change in the registered office address, I hereby as been notified in writing of this change.	lete perfo agent. O confirm	ormance r, if this that the	
M	ingrande (Registered egent) 12/5/08 (Date)			
If signing on bo	pehalf of an entity:			
	(Typed or Printed Name)			

* * * FILING FEE: \$35.00 * * *