

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00423

Entity Name: BEDFORD A CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DR
SUN CITY CENTER, FL 33573**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DR
SUN CITY CENTER, FL 33573 US**FEI Number:** 59-2133689**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVE
TAMPA FL 33602 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** BUSH ROSS, PA

02/23/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	FISHER, DAN
Address	13602 WILKES DRIVE
City-State-Zip:	TAMPA FL 33618
Title	SECRETARY, TREASURER
Name	AMISSON, RICHARD
Address	1802 BEDFORD LANE #14
City-State-Zip:	SUN CITY CENTER FL 33573
Title	DIRECTOR
Name	WEEDON, RAYMOND
Address	1802 BEDFORD LANE 16
City-State-Zip:	SUN CITY CENTER FL 33573

Title	DIRECTOR
Name	BUTLER, BARBARA
Address	1802 BEDFORD LANE #8
City-State-Zip:	SUN CITY CENTER FL 33573
Title	VPD
Name	FREDERICKS, RON
Address	1802 BEDFORD LANE #9
City-State-Zip:	SUN CITY CENTER FL 33573
Title	SECRETARY
Name	FALSETTI, DOMINICK
Address	1802 BEDFORD LANE #A-1
City-State-Zip:	SUN CITY CENTER FL 33573

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAN FISHER

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02/23/2015

Electronic Signature of Signing Officer/Director Detail

Date