2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005139

Entity Name: BEDFORD PARK AT TRADITION HOMEOWNERS

ASSOCIATION, INC.

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ASSOCIATION, INC.

Current Principal Place of Business:

543 NW LAKE WHITNEY PLACE STE 101 PORT ST. LUCIE, FL 34986

Current Mailing Address:

543 NW LAKE WHITNEY PLACE STE 101 PORT ST. LUCIE, FL 34986

FEI Number: 57-1172949 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS EARLE & BONAN, PA 789 S FEDERAL HWY STE 101 STUART, FL 34994 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:

Electronic Signature of Registered Agent

Date

FILED Apr 07, 2013

Secretary of State

CC8912457982

Officer/Director Detail:

Title P Title VP

Name GILFILLAN, CHRIS Name LYNCH, JOSEPH

Address 543 NW LAKE WHITNEY PLACE STE Address 543 NW LAKE WHITNEY PLACE STE

City-State-Zip: PORT SAINT LUCIE FL 34986 City-State-Zip: PORT SAINT LUCIE FL 34986

Title S Title T

Name BATES, MONA Name GONZALEZ, EMILO

Address 543 NW LAKE WHITNEY PLACE STE Address 543 NW LAKE WHITNEY PLACE STE

City-State-Zip: PORT SAINT LUCIE FL 34986 City-State-Zip: PORT ST LUCIE FL 34986

Title VP

Name THOMPSON, CHARLIE

Address 543 NW LAKE WHITNEY PLACE STE

101

City-State-Zip: PORT ST LUCIE FL 34986

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.

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SIGNATURE: CHRIS GILFILLAN

Electronic Signature of Signing Officer/Director Detail

04/07/2013