I hereby certify that the information indicated on this report or supplemental report is true and at oath; that I am an officer or director of the corporation or the receiver or trustee empowered to e above, or on an attachment with all other like empowered.		
SIGNATURE: JOSEPH PIATCHEK	Р	04/05/2016

Entity Name: BEDFORD PARK AT TRADITION HOMEOWNERS ASSOCIATION, INC.

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

11011 SW JOSEPH LANE PORT ST. LUCIE, FL 34987

Current Mailing Address:

DOCUMENT# N0300005139

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

FEI Number: 57-1172949

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

Officer/Director Detail :

Officer/Dire	ctor Detail :		
Title	PRESIDENT	Title	SECRETARY
Name	PIATCHEK, JOSEPH	Name	BEHRENS, GERTRUDE
Address	543 NW LAKE WHITNEY PLACE STE 101	Address	543 NW LAKE WHITNEY PLACE STE 101
City-State-Zip:	PORT SAINT LUCIE FL 34986	City-State-Zip:	PORT SAINT LUCIE FL 34986
Title	VP	Title	DIRECTOR
Name	GONZALEZ, EMILO	Name	MALAN, SCOTT
Address	543 NW LAKE WHITNEY PLACE STE 101	Address	543 NW LAKE WHITNEY PLACE STE 101
City-State-Zip:	PORT ST LUCIE FL 34986	City-State-Zip:	PORT ST. LUCIE FL 34986
Title	TREASURER		
Name	DUFOUR, RICHARD		
Address	543 NW LAKE WHITNEY PLACE STE 101		
City-State-Zip:	PORT ST. LUCIE FL 34986		

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail

Date

Date