N00427

·	(Requestor's Name)	
	(Address)	
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	(City/State/Zip/Phone #)	<u> </u>
PICK-UF	> WAIT	MAIL
		;
	(Business Entity Name)	
· .	(Document Number)	***
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SECRETARY OF STATE
ALLARASSEE FLOOR

NAM!

COVER LETTER

SUBJECT:BEDFORD H CONDOMINIUM ASSOC. INC					
	Name of Co	orporation			
DOCUMENT NUM	BER:N	100427			
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:					
	-	_			
	Douglas Name of Cor	Christy			
_	Name of Con	tact Person			
Wetherington, Hamilton, Harrison & Fair, PA					
	Firm/Company				
1010 N. Florida Avenue					
	Addr	ess			
Tampa, Florida 33602 City/State and Zip Code					
	City/State an	a zip code			
	dgc@whhf-				
E-mail address: (to be used for future annual report notification)					
For further informatio	n concerning this matter, please c	all:			
_		0.40			
	ouglas Christy of Contact Person	_ at (<u>813</u>) Area Code & Daytii	225-1918 x 29		
Trumo (or Comact region	Med Code & Dayin	me relephone (vamoe)		
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address:	Street Address:			
	Amendment Section	Amendment Se	ection		
•	Division of Corporations	Division of Co			
	P.O. Box 6327	Clifton Buildir			
	Tallahassee, FL 32314	2661 Executive	e Center Circle		

Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

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, Ftorida Stange is submitted for a corporation organized under the laws of the State of \overline{F} er to change its registered office or registered agent, or both, in the State of Fl	lorida		
	the corporation: Bedford H Condominium Association, Inc.			
•	l office address։ c/o Sterling Management Services, 1904 Clubhoւ Center, FL 33573	ise Drive		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 12/16/1983 Document number:	N00427		
	d street address of the current registered agent and registered office on file with rtment of State: (If resigned, enter resigned)	ı the		
	James R. DeFurio, Esq.	• ·		
	201 E. Kennedy Blvd., Suite 1460			
	Tampa, FL 33602			
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi	FILE 09 OCT -2 F		
	Douglas Christy, Esq.	SE P		
	1010 N. Florida Avenue	TO TO		
	P.O. Box NOT acceptable Tampa, FL. 33602	: 52 STATI		
The street addre	ress of its registered office and the street address of the business office of its l be identical.	registered agent,		
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an he board, or the corporation has been notified in writing of the change.	officer so		
Signatu	Brian L. May use of ear of ficer or diffector Printed or typed name and titl	e		
I hereby accept I further agree of of my duties, an document is bei corporation has	t the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and com nd I am familiar with and accept the obligation of my position as registered ing filed merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.	plete performance l agent. Or, if this y confirm that the		
Sig	gnature of Registered Agent 9124109 Date			
If signing on be	ehalf of an entity:			
	Douglas Christy Typed or Printed Name			
* * * FILING FEE: \$35.00 * * *				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)