

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34982

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: BEDFORD "K" CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

263 BEDFORD K  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

SEACREST SERVICES INC  
2400 CENTRE PARK DR W, #175  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

FEI Number: 59-1654993

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SILBER, IRVING  
263 BEDFORD K  
WEST PALM BEACH, FL 33417 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SILBER, IRVING  
Address: BEDFORD K-263  
City-St-Zip: WEST PALM BEACH, FL

Title: T ( ) Delete  
Name: SILBER, IRVING  
Address: 263 BEDFORD K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: SD ( ) Delete  
Name: MANISCHOWITZ, ESTHER  
Address: BEDFORD K-265  
City-St-Zip: WEST PALM BEACH, FL

Title: VP ( ) Delete  
Name: EDY, SHARON  
Address: BEDFORD K-262  
City-St-Zip: WEST PALM BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: SILBER, IRVING  
Address: 263 BEDFORD K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP (X) Change ( ) Addition  
Name: SHARON, EDY  
Address: 262 BEDFORD K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T (X) Change ( ) Addition  
Name: POLISENA, HELEN  
Address: 267 BEDFORD K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S (X) Change ( ) Addition  
Name: MANASHOWITZ, ESTELLE  
Address: 265 BEDFORD K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GALE CORONA

MS

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date