

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000003570

Entity Name: BEDFORD FUNDING CORP.

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

P.O. BOX 290998
PT. ORANGE, FL 321290998

New Principal Place of Business:

724 TOMOKA FARMS RD
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

P.O. BOX 290998
PT. ORANGE, FL 321290998

New Mailing Address:

FEI Number: 59-3672426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOPWOOD, MARCIA D
724 TOMOKA FARMS RD.
NEW SMYRNA BEACH, FL 32168 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOPWOOD, ROLAND C JR
Address: PO BOX 290998
City-St-Zip: PORT ORANGE, FL 321290998

Title: VTSD () Delete
Name: HOPWOOD, MARCIA
Address: PO BOX 290998
City-St-Zip: PORT ORANGE, FL 321290998

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARCIA D. HOPWOOD

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03/25/2009

Electronic Signature of Signing Officer or Director

Date