

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00429

FILED
Feb 28, 2014
Secretary of State
CC4515653142

Entity Name: BEDFORD B CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DRIVE
SUN CITY CENTER, FL 33573

Current Mailing Address:

FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DRIVE
SUN CITY CENTER, FL 33573 US

FEI Number: 59-2155854

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVE
TAMPA, FL 33602 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: BUSH ROSS, PA

02/28/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name MORRELL, DON
Address 1801 BEDFORD LANE #37
City-State-Zip: SUN CITY CENTER FL 33573

Title VPD
Name MONTGOMERY, VIRGINIA
Address 1801 BEDFORD LANE #38
City-State-Zip: SUN CITY CENTER FL 33573

Title SD
Name RUDNER, PATSY
Address 1801 BEDFORD LANE #41
City-State-Zip: SUN CITY CENTER FL 33573

Title TD
Name APEL, BARBARA
Address 1801 BEDFORD LANE #39
City-State-Zip: SUN CITY CENTER FL 33573

Title D
Name CAMP, CAROL
Address 1801 BEDFORD LANE #48
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name TACKET, JEWELL
Address 1801 BEDFORD LANE #27
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name CARLSON, LILIAN
Address 1801 BEDFORD LANE #28
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name VAUGHN, CAROLYN
Address 1801 BEDFORD LN
B31
City-State-Zip: SUN CITY CENTER FL 33573

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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.

SIGNATURE: MORRELL , DON

PD

02/28/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FALSETTI, DOMINICK
Address 1801 BEDFORD LANE
 B30
City-State-Zip: SUN CITY CENTER FL 33573