

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # N37363 (1)
1. Corporation Name
BEDFORD I CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business		Mailing Address	
% FRANCES FRESCO BEDFORD I CONDOM. APT 1-215. CENTURY VILLA W. PALM BEACH FL 33417		% FRANCES FRESCO BEDFORD I CONDOM. APT 1-215. CENTURY VILLA W. PALM BEACH FL 33417	
2. Principal Place of Business	2a. Mailing Address		
21 224 BEDFORD I	26		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 WEST PALM BEACH	27		
City & State	City & State		
23 FL	28		
Zip	Country	Zip	Country
24 33417	25	29	30

3. Date Incorporated or Qualified 03/26/1990	
4. FEI Number 59-1661016	Applied For Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
FRESCO, FRANCES
BEDFORD I CONDOMINIUM
CENTURY VILLAGE, APT 1-215
W. PALM BEACH FL 33417

10. Name and Address of New Registered Agent	
81 Name	JACK AKMAN
82 Street Address (P.O. Box Number is Not Acceptable)	224 BEDFORD I
83	CENTURY VILLAGE
84 City	WEST PALM BEACH
85 State	FL
86 Zip Code	33417

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Jack Akman - JACK AKMAN Pres. DATE 1/8/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	KAHN, RAYMOND
STREET ADDRESS	BEDFORD I-218 CENVE
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	DV <input checked="" type="checkbox"/> DELETE
NAME	FRIEDLAND, JACK
STREET ADDRESS	BEDFORD I-228 CENVE
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	DS <input type="checkbox"/> DELETE
NAME	JAFFEE, JULIETTE
STREET ADDRESS	BEDFORD I-214 CENVE
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	DT <input checked="" type="checkbox"/> DELETE
NAME	SOBEL, SOL
STREET ADDRESS	BEDFORD I-230 CENVE
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	BERKOWITZ, ELIZABETH
STREET ADDRESS	BEDFORD I-212 CENVE
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	D <input type="checkbox"/> DELETE
NAME	SHAPIRO, MARVIN
STREET ADDRESS	BEDFORD I-215 CENVE
CITY-ST-ZIP	W. PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	VIRGINIA RANDALL
1.3 STREET ADDRESS	BEDFORD I CEN. VILL 222
1.4 CITY-ST-ZIP	W. PALM BEACH, FL 33417
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	DOROTHY AHNEN
2.3 STREET ADDRESS	BEDFORD I 210
2.4 CITY-ST-ZIP	W. P. B. FL 33417
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	CLARENCE W RANDALL
3.3 STREET ADDRESS	222 BEDFORD I
3.4 CITY-ST-ZIP	WPPB FL 33417
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	GEORGETTE PAQUETTE
4.3 STREET ADDRESS	211 BEDFORD I
4.4 CITY-ST-ZIP	WPPB FL 33417
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	LEON ALLEN
5.3 STREET ADDRESS	210 BEDFORD I
5.4 CITY-ST-ZIP	WPPB FL 33417
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	MARVIN SHAPIRO
6.3 STREET ADDRESS	215 BEDFORD I
6.4 CITY-ST-ZIP	WEST PALM BEACH FL 33417

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Jack Akman DATE 1/8/97

CR2E037 (10/97)

Add
Board of Directors

DS

JAFFE, JULIETTE
BEDFORD I #214
WEST PALM BEACH FL

~~D. MARVIN SHAPIRO~~
~~215 BEDFORD I~~
~~WEST PALM BEACH FL~~