

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 762172 (5)

1. Corporation Name
BAC FUNDING CORPORATION



Principal Place of Business 6600 NW 27 AVE MIAMI FL 33147 US	Mailing Address 6600 NW 27 AVE MIAMI FL 33147-7220 US
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3. Date Incorporated or Qualified 04/22/1982	3a. Date of Last Report 03/11/1996
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2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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4. FEI Number 59-2196535	Applied For <input type="checkbox"/> Not Applicable
5. 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HOBBS, GREGORY
6600 NW 27 AVE
MIAMI FL 33147**

10. Name and Address of New Registered Agent

81. Name
MILLER, EDWIN L.

82. Street Address (P.O. Box Number is Not Acceptable)
6600 NW 27 AVE

83. City
MIAMI

84. State
FL

85. Zip Code
33147

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: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE: **06/05/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CURRY, CYNTHIA W.		1.2 NAME MCNEILL, E. ANN	
STREET ADDRESS 6600 NW 27TH AVE.		1.3 STREET ADDRESS 6600 NW 27 AVE.	
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP MIAMI, FL 33147	
TITLE CD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FRAZIER, RONALD E		2.2 NAME	
STREET ADDRESS 1320 NW 88TH STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		2.4 CITY-ST-ZIP	
TITLE P	<input checked="" type="checkbox"/> DELETE	3.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HOBBS, GREGORY		3.2 NAME MILLER, EDWIN L.	
STREET ADDRESS 6600 N.W. 27TH AVENUE		3.3 STREET ADDRESS 6600 NW 27 AVE.	
CITY-ST-ZIP MIAMI FL		3.4 CITY-ST-ZIP MIAMI, FL 33147	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SHURMAN, JOHN L		4.2 NAME	
STREET ADDRESS 6600 N.W. 27TH AVENUE		4.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33147		4.4 CITY-ST-ZIP	
TITLE TD	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KERSHAW, HOWARD		5.2 NAME	
STREET ADDRESS ONE S.E. 3RD AVENUE		5.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

CP2E037 (9/96)