


2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
May 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 766594
1. Entity Name
BAC FUNDING CONSORTIUM, INC.



Principal Place of Business
6600 N.W. 27TH AVE
MIAMI FL 33147 IIS

Mailing Address
6600 N.W. 27TH AVE
MIAMI, FL 33147 US

DO NOT WRITE IN THIS SPACE



05022006 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2425541

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, EDWIN L.
6600 N.W. 27 AVE.
MIAMI, FL 33147

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Edwin L. Miller, President* DATE: *05/04/2006*

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD FRAZIER, RONALD E. 1320 N.W. 88TH STREET MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MILLER, EDWIN L. 6600 N.W. 27 AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD LATIMER, OTTO 17121 NE 6TH AVE MIAMI, FL 33162
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOLDBERG, BARTON S 6600 NW 27TH AVE. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD VICKERS, KARIN 14850 NW 77TH CT STE 200 MIAMI LAKES, FL 33016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARTIN, DANNY 2495 NW 82ND AVE MIAMI, FL 33122

1100000565345
05/20/06-80128-008 61.25

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edwin L. Miller* DATE: *05/04/2006* (305) 693-3555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR