

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762172

FILED
Apr 02, 2019
Secretary of State
8771535895CC

Entity Name: BAC FUNDING CORPORATION

Current Principal Place of Business:

6600 NW 27 AVE
MIAMI, FL 33147

Current Mailing Address:

6600 NW 27 AVE
MIAMI, FL 33147 US

FEI Number: 59-2196535

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRAZIER, RONALD E
6600 NW 27TH AVENUE
MIAMI, FL 33147 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CD
Name FRAZIER, RONALD E
Address 900 NE 97TH STREET
City-State-Zip: MIAMI FL 33138

Title SD
Name LATIMER, OTTO
Address 20451 NW 2ND AVENUE
SUITE 111
City-State-Zip: MIAMI GARDENS FL 33169

Title DIRECTOR
Name GARRETT, LEONARD
Address 3707 STARBOARD AVENUE
City-State-Zip: COOPER CITY FL 33026

Title DIRECTOR
Name FORBES, RICARDO
Address 6855 RED ROAD
SUITE 600
City-State-Zip: CORAL GABLES FL 33143

Title DIRECTOR
Name JOHNSON, STEPHEN
Address 1221 BRICKELL AVENUE
19TH FLOOR
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name RASCO, MIGUEL
Address 200 SOUTH BISCAYNE BOULEVARD
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name BRYANT, LINDA
Address 12902 SW 50TH STREET
City-State-Zip: MIRAMAR FL 33027

Title DIRECTOR
Name KNOWLES, ERIC
Address 100 SOUTH BISCAYNE BOULEVARD
3RD FLOOR
City-State-Zip: MIAMI FL 33131

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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: RONALD E. FRAZIER

CHAIRMAN

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HALL, JOHN
Address 6600 NW 27 AVE
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name MARTIN, SONLESS
Address 15897 NW 4TH COURT
City-State-Zip: PEMBROKE PINES FL

Title DIRECTOR
Name RANGE, PATRICK
Address 5727 NW 17TH AVENUE
City-State-Zip: MIAMI FL 33142

Title DIRECTOR
Name HAYES, MONIQUE D
Address 936 SW 1ST AVENUE
MAILBOX 361
City-State-Zip: MIAMI FL 33130