## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003608

Entity Name: STATE BOARD OF ADMINISTRATION FINANCE CORPORATION

FILED
Jan 29, 2019
Secretary of State
7742255872CC

## **Current Principal Place of Business:**

1801 HERMITAGE BLVD. SUITE 100 TALLAHASSEE. FL 32308

## **Current Mailing Address:**

1801 HERMITAGE BLVD. SUITE 100 TALLAHASSEE, FL 32308 US

FEI Number: 59-3427843 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HAZEN, MAUREEN M GENERAL COUNSEL,STATE BOARD OF ADMINISTRATION OF FLORIDA 1801 HERMITAGE BLVD.,SUITE 100 TALLAHASSEE, FL 32308 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: MAUREEN M. HAZEN 01/29/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DC Title D

 Name
 DESANTIS, RON
 Name
 MOODY, ASHLEY

 Address
 PL05, THE CAPITOL
 Address
 PL01 THE CAPTIOL

City-State-Zip: TALLAHASSEE FL 32399-0001 City-State-Zip: TALLAHASSEE FL 32399-1050

Title TD Title D

Name PATRONIS, JIMMY Name WATKINS, BEN

Address PL01, THE CAPTIOL Address 1801 HERMITAGE BLVD, 2ND FLOOR

City-State-Zip: TALLAHASSEE FL 32399 City-State-Zip: TALLAHASSEE FL 32308

Title DP Title SEC

Name BERT, ANNE Name BRENNEIS, JOHN

Address 1801 HERMITAGE BLVD., FIRST Address 1801 HERMITAGE BLVD., FIRST

FLOOR FLOOR

City-State-Zip: TALLAHASSEE FL 32308 City-State-Zip: TALLAHASSEE FL 32308

Title TREASURER
Name WILSON, GINA

Address STATE BOARD OF ADMINISTRATION

OF FI

1801 HERMITAGE BLVD. SUITE 100

City-State-Zip: TALLAHASSEE FL 32308

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: ANNE BERT FHCF CHIEF OPERATING 01/29/2019 OFFICER

Electronic Signature of Signing Officer/Director Detail

Date