

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000076271

**Entity Name:** BAC GLOBAL ADVISORS, INC.**Current Principal Place of Business:**2333 PONCE DE LEON BLVD  
SUITE 700A  
CORAL GABLES, FL 33134**Current Mailing Address:**2333 PONCE DE LEON BLVD  
SUITE 700A  
CORAL GABLES, FL 33134 US**FEI Number:** 11-3655905**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PANNELLA, ANNA MARIA  
BAC FLORIDA BANK  
169 MIRACLE MILE, R-10  
CORAL GABLES, FL 33134 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:** ANNA MARIA PANNELLA

04/25/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name PELLAS, F. ALFREDO JR.  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name PARAJON, LUIS  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title MANAGING DIRECTOR  
Name INCER-ROMEO, MARIA E.  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name ROJAS, JULIO  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title VC  
Name TIPPLE, RALPH T  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name DEBAYLE, LEON  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY  
Name EGUILIOR, GENEMARIE B.  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

Title MANAGING DIRECTOR  
Name VILLAMIZAR, CARLOS L  
Address 2333 PONCE DE LEON BLVD  
SUITE 700A  
City-State-Zip: CORAL GABLES FL 33134

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GENEMARIE EGUILIOR**SECRETARY**

04/25/2018

Electronic Signature of Signing Officer/Director Detail

Date