2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762172

FILED Jaņ 15, 2<u>00</u>9 Secretary of State

Entity Name: BAC FUNDING CORPORATION

Current Principal Place of Business: New Principal Place of Business:

6600 NW 27 AVE MIAMI, FL 33147 US

Current Mailing Address: New Mailing Address:

6600 NW 27 AVE MIAMI, FL 33147 US

FEI Number: 59-2196535 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLER, EDWIN L. 6600 NW 27 AVE, US MIAMI, FL 33147

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:

Date

Name:

Electronic Signature of Registered Agent

(X) Change () Addition

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FRAZIER, RONALD E,

() Delete FRAZIER, RONALD E, Name: 1320 NW 88TH STREET Address:

Address: 2125 BISCAYNE BLVD., SUITE 330 MIAMI, FL

City-St-Zip: City-St-Zip: MIAMI, FL 33131

Title: PD () Delete Title: (X) Change () Addition

Name: MILLER, EDWIN L. Name: MILLER, EDWIN L. Address: 6600 N.W. 27TH AVENUE Address: 6600 N.W. 27TH AVENUE City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL 33147

Title: () Delete Title: () Change () Addition

HARVEY, RODERICK Name: Name: 3107 W HALLANDALE BEACH BLVD #112 Address: Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip:

(X) Change () Addition Title: D () Delete Title:

Name: BERNARD, BASIL Name: BERNARD, BASIL

386 NE 191 STREET Address: Address: 1013 PARK CENTRE BLVD. City-St-Zip: MIAMI, FL City-St-Zip: MIAMI GARDENS, FL 33169

Title: SD () Delete Title: () Change () Addition

LATIMER, OTTO Name: Name: 17121 NE 6TH AVE Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

DIAZ-LEAL, CLARA WEST, TERRELL Name: Name:

Address: 200 S BISCAYNE BLVD, SUITE #1500 Address: 1 ALHAMBRA PLAZA, SUITE 1436 MIAMI, FL 33131 CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EDWIN L. MILLER PD 01/15/2009

Electronic Signature of Signing Officer or Director

Date