

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002496

FILED
Jan 21, 2011
Secretary of State

Entity Name: EMIGRANT FUNDING CORPORATION

Current Principal Place of Business:

5 EAST 42ND STREET
LEGAL DEPT.
NEW YORK, NY 10017

New Principal Place of Business:

5 EAST 42ND STREET
NEW YORK, NY 10017

Current Mailing Address:

5 EAST 42ND STREET
NEW YORK, NY 10017

New Mailing Address:

5 EAST 42ND STREET
ATTN: LINDA YOUNG, LEGAL DEPT.
NEW YORK, NY 10017

FEI Number: 13-3465439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DPCO
Name: WALD, RICHARD
Address: 5 EAST 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: SVP
Name: HOLLNSTEINER, PETER
Address: 5 EAST 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: S
Name: HICKEY, DANIEL C
Address: 5 EAST 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: DT
Name: MAY, FRANCIS
Address: 5 EAST 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: D
Name: HART, JOHN
Address: 5 EAST 42ND STREET
City-St-Zip: NEW YORK, NY 10017

Title: DCEO
Name: JACOB, SAMUEL
Address: 5 E 42ND ST
City-St-Zip: NEW YORK, NY 10017

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: PETER HOLLNSTEINER

SVP

01/21/2011

Electronic Signature of Signing Officer or Director

Date