

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002460

FILED
Jan 05, 2010
Secretary of State

Entity Name: BAYVIEW FINANCIAL SECURITIES COMPANY, LLC

Current Principal Place of Business:

4425 PONCE DE LEON BLVD, 4TH FLOOR
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4425 PONCE DE LEON BLVD, 4TH FLOOR
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 56-2336517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOMSTEIN, BRIAN E
4425 PONCE DE LEON BLVD., 4TH FLOOR
CORAL GABLES, FL 33146 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ERTEL, DAVID
Address: 4425 PONCE DE LEON BLVD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRP
Name: QUINT, DAVID E
Address: 4425 PONCE DE LEON BLVD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: MGR
Name: UVA, KENNETH
Address: C/O 4425 PONCE DE LEON BLVD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: ASV
Name: THOMAS, CARR
Address: 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: VPS
Name: BOMSTEIN, BRIAN E
Address: 4425 PONCE DE LEON BLVD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33146

Title: VCFO
Name: FISCHER, JOHN H
Address: 4425 PONCE DE LEON BLVD., 4TH FLOOR
City-St-Zip: MIAMI, FL 33146

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN E. BOMSTEIN

VSP

01/05/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date