## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M07000006602

Entity Name: BAYVIEW FINANCIAL FUND PARTNER, LLC

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	ICE DE LEON ABLES, FL 33	BLVD., 5TH FLOOR 3146					
Current N	ı	New Mailing Address:					
	ICE DE LEON ABLES, FL 33	BLVD., 5TH FLOOR 3146					
FEI Number	: 26-1369475	FEI Number Applied For ( )	FEI Numb	oer Not App	licable ( )	Certificate of Status Desired	()
Name and	d Address of	Current Registered Agent:	ı	Name and	Address	of New Registered Agent:	
4425 PON	N, BRIAN E ICE DE LEON ABLES, FL 33	BLVD., 5TH FLOOR 3146 US					
	e named entity e of Florida.	submits this statement for the	purpose of	changing i	its registere	ed office or registered agent, c	r both,
SIGNATUI	RE:						
	Electro	nic Signature of Registered Ag	ent			Date	
MANAGING	MEMBERS/MAN	AGERS:	,	ADDITIONS/	CHANGES:		
Title: Name: Address: City-St-Zip:	QUINT, DAVID	DE LEON BLVD., 5TH FLOOR	1	Fitle: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ERTEL, DAVID	DE LEON BLVD	1	Fitle: Name: Address: City-St-Zip:		( ) Change() Addition	
Title: Name: Address: City-St-Zip:	FISCHER, JOH	DE LEON BLVD	1	Fitle: Name: Address: City-St-Zip:		(X) Change ()Addition JOHN H CE DE LEON BLVD BLES, FL 33146	
Title: Name: Address: City-St-Zip:	BOMSTEIN, B	DE LEON BLVD	1	Fitle: Name: Address: City-St-Zip:	SVS BOMSTEIN 4425 PONO MIAMI, FL	CE DE LEON BLVD	
Title: Name: Address: City-St-Zip:	EVENSON, BF	DE LEON BLVD	1	Fitle: Name: Address: City-St-Zip:		( ) Change() Addition	
Title: Name: Address: City-St-Zip:	SOMERVILLE	DE LEON BLVD	1	Fitle: Name: Address: City-St-Zip:		(X) Change ( ) Addition RICHARAD DE DE LEON BLVD BLES, FL 33146	

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 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: DAVID ERTEL MGR 01/13/2009

NAME: DOCUMENT NO.

Bayview Financial Fund Partner, LLC M07000006602

TITLE	SVP	★ Addition
NAME	Waldman, Stuart	
STREET ADDRESS	4425 Ponce de Leon Blvd., 4th Floor	
CITY-ST-ZIP	Coral Gables, FL 33146	
TITLE	VP	Addition
NAME	Lominac, Eve	-
STREET ADDRESS	4425 Ponce de Leon Blvd., 4th Floor	
CITY-ST-ZIP	Coral Gables, FL 33146	
TITLE	VP	Addition
NAME	Wagovich, Tammie	Harris A. C.
STREET ADDRESS	4425 Ponce de Leon Blvd., 4th Floor	
CITY-ST-ZIP	Coral Gables, Florida 33146	
		<del></del>
TITLE	VP	
NAME	Briggs, David	
STREET ADDRESS	4425 Ponce de Leon Blvd., 4th Floor	
CITY-ST-ZIP	Coral Gables, FL 33146	
		<u> </u>
TITLE	VPC	
NAME	Glassman, Mark	
STREET ADDRESS	4425 Ponce de Leon Blvd., 4th Floor	
CITY-ST-ZIP	Coral Gables, FL 33146	
TITLE	VPAS	
NAME	Carr, Thomas	
STREET ADDRESS 4425 Ponce de Leon Blyd., 4th Floor		
CITY-ST-ZIP	Coral Gables, FL 33146	
<del></del>		