

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000001576

Entity Name: BAYVIEW HOME MANAGEMENT, LLC**Current Principal Place of Business:**4425 PONCE DE LEON BLVD
5TH FL
CORAL GABLES, FL 33146**Current Mailing Address:**4425 PONCE DE LEON BLVD
5TH FL
CORAL GABLES, FL 33146**FEI Number:** 35-2440563**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOMSTEIN, BRIAN E
4425 PONCE DE LEON BLVD
5TH FL
CORAL GABLES, FL 33146 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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR, PCEO
Name ERTEL, DAVID
Address 4425 PONCE DE LEON BLVD, 5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT
Name WILLIAMS, MARVIN
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT & SECRETARY
Name BOMSTEIN, BRIAN
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT
Name LOMINAC, EVE
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT
Name O'BRIEN, RICHARD
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT & CFO
Name FISCHER, JOHN
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT & ASST.
SECRETARY
Name CARR, THOMAS
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title FIRST VICE PRESIDENT &
CONTROLLER
Name GLASSMAN, MARK
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN E. BOMSTEIN

SVPS

04/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title FIRST VP
Name GUSS, MICHAEL
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name ARONOVITZ, ROSS
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SVP & TREASURER
Name LIEBLICH, JAMES
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title SR. VICE PRESIDENT
Name GOLDMAN, JOEL K.
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title ASST. VICE PRESIDENT
Name BURGIO, MAURO
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146

Title FIRST VP
Name YURKON, MATTHEW
Address 4425 PONCE DE LEON BLVD
5TH FL
City-State-Zip: CORAL GABLES FL 33146