2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000002819

Entity Name: BUILDING HOPE...A CHARTER SCHOOL FACILITIES FUND

CORPORATION

Current Principal Place of Business:

910 17TH ST NE #1100

WASHINGTON, DC 20006

Current Mailing Address:

910 17TH ST NE #1100 WASHINGTON, DC 20006

FEI Number: 20-0367954 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Mar 07, 2016

Secretary of State

CC1596123607

Officer/Director Detail:

Title Title D

Name KELER, MARIANNE Name BARRUETA, FERNANDO Address 910 17TH ST NE #1100 Address 910 17TH ST NE #1100 City-State-Zip: WASHINGTON DC 20006 City-State-Zip: WASHINGTON DC 20006

Title Title D

BRUNO, S JOSEPH Name QUINBY, BILL Name Address 910 17TH ST NE #1100 Address 910 17TH ST NE #1100 City-State-Zip: WASHINGTON DC 20006 City-State-Zip: WASHINGTON DC 20006

Title Title **VPS**

Name LELECK, PAUL R Name PORTER, THOMAS Address 910 17TH ST NE #1100 910 17TH ST NE #1100 Address City-State-Zip: WASHINGTON DC 20006 WASHINGTON DC 20006 City-State-Zip:

Title D Title D

Name MUFFLER, JOSEPH Name MACIE, SHEILA R Address 910 17TH ST NE #1100 Address 910 17TH ST NE #1100 WASHINGTON DC 20006 City-State-Zip: WASHINGTON DC 20006 City-State-Zip:

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

03/07/2016 SIGNATURE: THOMAS PORTER **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name D'ALESSANDRO, AL
Address 910 17TH ST NE #1100
City-State-Zip: WASHINGTON DC 20006

Title D

Name JAYCHANDRAN, PRIYA Address 910 17TH ST NE #1100

City-State-Zip: WASHINGTON DC 20006

Title D

Name LAWICKI, PATRICIA
Address 910 17TH ST NE #1100
City-State-Zip: WASHINGTON DC 20006