

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847716

Entity Name: BUSINESS PROPERTY LENDING, INC.**Current Principal Place of Business:**501 RIVERSIDE AVENUE
12 FLOOR
JACKSONVILLE, FL 32202**Current Mailing Address:**501 RIVERSIDE AVENUE
12 FLOOR
JACKSONVILLE, FL 32202 US**FEI Number:** 36-1208070**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**Officer/Director Detail :**Title DIRECTOR, PRESIDENT
Name DEPILLO, DAVID
Address 501 RIVERSIDE AVENUE
12 FLOOR
City-State-Zip: JACKSONVILLE FL 32202Title CEO
Name SEIBLY, GREG
Address 501 RIVERSIDE AVENUE
12 FLOOR
City-State-Zip: JACKSONVILLE FL 32202Title DIRECTOR
Name PATAKY, JOHN
Address 501 RIVERSIDE AVENUE
12 FLOOR
City-State-Zip: JACKSONVILLE FL 32202Title SECRETARY
Name BAUM, MARK G
Address 501 RIVERSIDE AVENUE
12 FLOOR
City-State-Zip: JACKSONVILLE FL 32202Title CFO
Name POTTS, STEVEN
Address 501 RIVERSIDE AVENUE
12 FLOOR
City-State-Zip: JACKSONVILLE FL 32202Title TREASURER
Name PATRA, SWARUP
Address 501 RIVERSIDE AVENUE
12 FLOOR
City-State-Zip: JACKSONVILLE FL 32202

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: MARK G. BAUM**SECRETARY****04/23/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date