

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001083

FILED
Jan 05, 2009
Secretary of State

Entity Name: MERCY LOAN FUND INC.

Current Principal Place of Business:

1999 BROADWAY, SUITE 100
DENVER, CO 80202

New Principal Place of Business:

Current Mailing Address:

1999 BROADWAY, SUITE 100
DENVER, CO 80202

New Mailing Address:

FEI Number: 84-1559406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: GOULD, JULIE
Address: 1320 N. FREDERICK ST.
City-St-Zip: ARLINGTON, VA 22205

Title: VC () Delete
Name: EDSON, CHARLES
Address: 401 NINTH STREET NW
City-St-Zip: WASHINGTON, DC 20004

Title: D () Delete
Name: DARTIS, CARLA
Address: 1014 TORNEY AVENUE
City-St-Zip: SAN FRANCISCO, CA 94129

Title: D () Delete
Name: EAKIN, DEBRA
Address: 950 17TH STREET, 5TH FLOOR
City-St-Zip: DENVER, CO 80202

Title: P () Delete
Name: LEAVESLEY, DIANE
Address: 1999 BROADWAY, SUITE 1000
City-St-Zip: DENVER, CO 80202

Title: V () Delete
Name: BANKS, RICHARD
Address: 1999 BROADWAY, SUITE 100
City-St-Zip: DENVER, CO 80202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: KORELL, MARK
Address: 6465 GREENWOOD PLAZA BLVD., FLR 9
City-St-Zip: ENGLEWOOD, CO 80111

Title: VC (X) Change () Addition
Name: BUCKELY, GRACE
Address: 1620 LITTLE RAVEN ST., #601
City-St-Zip: DENVER, CO 80202

Title: D (X) Change () Addition
Name: HUBBARD, DARRELL
Address: 120 S. RIVERSIDE PLAZA, 15TH FLOOR
City-St-Zip: CHICAGO, IL 60606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: DIANE LEAVESLEY

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date