

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004253

FILED
Apr 12, 2006
Secretary of State

Entity Name: THE LOAN CORPORATION

Current Principal Place of Business:

4890 W KENNEDY BLVD
SUITE #260
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

4890 W KENNEDY BLVD
SUITE #260
TAMPA, FL 33609

New Mailing Address:

FEI Number: 33-0889627 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEDAYA, HARRY
4890 W. KENNEDY BLVD. #260
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

HEDAYA, HARRY
4890 W. KENNEDY BLVD.
SUITE #260
TAMPA, FL 33609 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:

04/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEDAYA, HARRY
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

Title: S () Delete
Name: JONES, JENNIFER
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

Title: V () Delete
Name: MATTHEWS, RANDY
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

Title: V (X) Delete
Name: ANDERSON, PETER
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

Title: V (X) Delete
Name: BLAKE, RICHARD
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

Title: V (X) Delete
Name: YEDVAB, MIRIAM
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: JOHNSTON, SHERI L
Address: 4890 W. KENNEDY BLVD. #260
City-St-Zip: TAMPA, FL 33609

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

SIGNATURE: JENNIFER JONES

S

04/12/2006

Electronic Signature of Signing Officer or Director

Date