2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# F01000000824

Entity Name: NELLIE MAE CORPORATION

Current Principal Place of Business:

50 BRAINTREE HILL OFFICE PARK, SUITE 300
BRAINTREE, MA 02184

New Principal Place of Business:

51002 ARTHUR DRIVE
LYNN HAVEN, FL 32444

Current Mailing Address:

12061 BLUEMONT WAY
RESTON, VA 20190

New Mailing Address:

FEI Number: 04-3473373 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	WENTWORTH, DENNIS K	
Address:	11100 USA PARKWAY	
City-St-Zip:	FISHERS, IN 46037	
Title:	P	( ) Delete
Name:	WENTWORTH, DENNIS K	
Address:	11100 USA PARKWAY	
City-St-Zip:	FISHERS, IN 46037	
Title:	T	( ) Delete
Name:	MCMANUS, JOHN S	
Address:	12061 BLUEMONT WAY	
City-St-Zip:	RESTON, VA 20190	
Title:	S	( ) Delete
Name:	EURE, MARY F	
Address:	12061 BLUEMONT WAY	
City-St-Zip:	RESTON, VA 20190	
Title:	AS	( ) Delete
Name:	RAKATANSKY, CAROL R	
Address:	12061 BLUEMONT WAY	
City-St-Zip:	RESTON, VA 20190	
Title:	VP	( ) Delete
Name:	DALY MCCARTY, LAURA	
Address:	12061 BLUEMONT WAY	
City-St-Zip:	RESTON, VA 20190	

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:	JOHNSON, GRETCHEN C	
Address:	12061 BLUEMONT WAY	
City-St-Zip:	RESTON, VA 20190	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	DECK, NANCY	
Address:	12061 BLUEMONT WAY	
City-St-Zip:	RESTON, VA 20190	

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

SIGNATURE: MARY F. EURE SEC 01/21/2009

Electronic Signature of Signing Officer or Director — Date