

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90089 006 ****61.25

DOCUMENT # F03000000166



1. Entity Name

JEWISH EDUCATIONAL LOAN FUND, INC.

Principal Place of Business

**4549 CHAMBLEE DUNWOODY ROAD
ATLANTA GA 30338**

Mailing Address

**4549 CHAMBLEE DUNWOODY ROAD
ATLANTA GA 30338**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

58-0568686

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WRIGHT, ELAINE S MS.
3539 SANCTUARY BLVD.
JACKSONVILLE FL 32250**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-issuance)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C GREENSTONE, ALBERT 4549 CHAMBLEE DUNWOODY ROAD ATLANTA GA 30338 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P GARBER, MARIANNE PH.D. 4549 CHAMBLEE DUNWOODY ROAD ATLANTA GA 30338 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V SMULIAN, ROBERT 4549 CHAMBLEE DUNWOODY ROAD ATLANTA GA 30338 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V HYKEN, EDWARD 4549 CHAMBLEE DUNWOODY ROAD ATLANTA GA 30338 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V MONTAG, NED 4549 CHAMBLEE DUNWOODY ROAD ATLANTA GA 30338 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V WOLBE, LANE 4549 CHAMBLEE DUNWOODY ROAD ATLANTA GA 30338 | <input checked="" type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Chairman of the Board Marianne Daniels Garber 4549 Chamblee Dunwoody Rd. Atlanta, GA 30338 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | President NED MONTAG 4549 Chamblee Dunwoody Rd. Atlanta, GA 30338 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Robert Smulian 4549 Chamblee Dunwoody Road Atlanta, GA 30338 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Edward Hyken 4549 Chamblee Dunwoody Rd. Atlanta, GA 30338 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Randie Siegel 4549 Chamblee Dunwoody Rd. Atlanta, GA 30338 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Faye Silverman 4549 Chamblee Dunwoody Rd. Atlanta, GA 30338 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard Saaks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/27/2006

Daytime Phone #