2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# F03000000166

Entity Name: JEWISH EDUCATIONAL LOAN FUND, INC.

Current Principal Place of Business:

4549 CHAMBLEE DUNWOODY ROAD
ATLANTA, GA 30338

New Principal Place of Business:

Current Mailing Address:

4549 CHAMBLEE DUNWOODY ROAD
ATLANTA, GA 30338

New Mailing Address:

FEI Number: 58-0568686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, ELAINE S MS.
3539 SANCTUARY BLVD.
JACKSONVILLE, FL 32250 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:	COB	( ) Delete
Name:	MONTAG, EDWARD	
Address:	4549 CHAMBLEE DUNWOODY RD	
City-St-Zip:	ATLANTA, GA 30338	
Title:	P	( ) Delete
Name:	SMULIAN, ROBERT	
Address:	4549 CHAMBLEE DUNWOODY RD	
City-St-Zip:	ATLANTA, GA 30338	
Title:	V	( ) Delete
Name:	RICKLES, ROB	
Address:	4549 CHAMBLEE DUNWOODY RD	
City-St-Zip:	ATLANTA, GA 30338	
Title:	V	( ) Delete
Name:	HYKEN, EDWARD	
Address:	4549 CHAMBLEE DUNWOODY RD	
City-St-Zip:	ATLANTA, GA 30338	
Title:	V	( ) Delete
Name:	ALPERIN, JEFF	
Address:	4549 CHAMBLEE DUNWOODY RD	
City-St-Zip:	ATLANTA, GA 30338	
Title:	TRES	( ) Delete
Name:	SILVERMAN, FAYE	
Address:	4549 CHAMBLEE DUNWOODY RD	
City-St-Zip:	ATLANTA, GA 30338	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: ROBERT SMULIAN P 03/12/2009

Electronic Signature of Signing Officer or Director — Date