


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90261 030 ***158.75

DOCUMENT # F03000001083	
1. Entity Name COLLEGE LOAN CORPORATION	

Principal Place of Business C/O CARY S. KATZ 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127	Mailing Address C/O CARY S. KATZ 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127
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40077330

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04132007 Chg-P CR2E034 (12/06)

4. FEI Number 33-0873915		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent 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 reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO KATZ, CARY 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO WOOD, ELIZABETH 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, D KATZ, CARY S 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D BRENNER, MARK 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EX. V.P & Director Steve Snyder 16855 W. Bernardo Drive, Suite 100 San Diego, CA 92127 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCLAM, CURTIS 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, ELIZABETH 16855 WEST BERNARDO DR., STE. 100 SAN DIEGO, CA 92127 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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 Chapter 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 607, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Elwood

4/17/07

(858) 716-1954

2007 FOR PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

DOCUMENT # F03000001083



1. Entity Name
COLLEGE LOAN CORPORATION

Principal Place of Business
C/O CARY S. KATZ
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SAN DIEGO, CA 92127

Mailing Address
C/O CARY S. KATZ
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127

COPY

40077396

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Suite, Apt. #, etc.

Suite, Apt. #, etc.

04132007

Chg-P

CR2E034 (12/06)

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Not Applicable

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7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
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TALLAHASSEE, FL 32301-2525

Name

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

City

FL

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10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
KATZ, CARY
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO
WOOD, ELIZABETH
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S, D
KATZ, CARY S
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P, D
BRENNER, MARK
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCCLAM, CURTIS
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WOOD, ELIZABETH
16855 WEST BERNARDO DR., STE. 100
SAN DIEGO, CA 92127 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EX. V.P & Director
Steve Snyder
16855 W. Bernardo Drive, Suite 100
San Diego, CA 92127 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
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