## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000001083

**Entity Name: COLLEGE LOAN CORPORATION** 

FILED Jan 22, 2010 Secretary of State

Current Principal Place of Business:

ATTN: CORPORATE TAX PERSONNEL

14303 GATEWAY PLACE

POWAY, CA 92064

**Current Mailing Address:** 

ATTN: CORPORATE TAX PERSONNEL 14303 GATEWAY PLACE

POWAY, CA 92064

FEI Number: 33-0873915

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

**New Principal Place of Business:** 

LAS VEGAS, NV 89135

**New Mailing Address:** 

LAS VEGAS, NV 89135

ATTN: CORPORATE TAX PERSONNEL

ATTN: CORPORATE TAX PERSONNEL 10100 W. CHARLESTON BLVD., SUITE 130

10100 W. CHARLESTON BLVD., SUITE 130

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: CFOD Name: FALB, J

Name: FALB, JOHN Address: 10100 W. CHARLESTON BLVD., SUITE 130

City-St-Zip: LAS VEGAS, NV 89135

Title: CEOS Name: KATZ, CARY

Address: 10100 W. CHARLESTON BLVD., SUITE 130

City-St-Zip: LAS VEGAS, NV 89135

Title: PVPD

Name: SNYDER, STEVEN

Address: 10100 W. CHARLESTON BLVD., SUITE 130

City-St-Zip: LAS VEGAS, NV 89135

Title: [

Name: KATZ, CARY

Address: 14303 GATEWAY PLACE City-St-Zip: POWAY, CA 92064

Title: 0

Name: WOZNIAK, PAUL

Address: 10100 W. CHARLESTON BLVD., SUITE 130

City-St-Zip: LAS VEGAS, NV 89135

I hereby 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 all other like empowered.

SIGNATURE: JOHN FALB CFOD 01/22/2010