

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004999

FILED
Apr 27, 2009
Secretary of State

Entity Name: ENTERPRISE LOAN FUND INC.

Current Principal Place of Business:

C/O WOLFF J. CHARLES
220 EVERGREEN DRIVE
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

C/O WOLFF J. CHARLES
220 EVERGREEN DRIVE
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: 36-4635016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLES, WOLFF J
220 EVERGREEN DRIVE
LAKE PARK, FL 33403 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: D () Delete
Name: BOVELL, HENDERSON
Address: 3536 CHESAPEAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Delete
Name: ROSE, AMELIA I
Address: 1011 GREEN PINE BLVD., #F2
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D () Delete
Name: ST HILAIRE, LEMOINE
Address: 4221 NW 64TH DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: MARCELLE-CONEY, DEBRA
Address: 5832 CORSON PLACE
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: WALLACE, TOPAZS W
Address: 5163 ELPINE WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

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:

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: WOLFF J. CHARLES

RA

04/27/2009

Electronic Signature of Signing Officer or Director

Date