

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001854

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: E-LOAN, INC.

**Current Principal Place of Business:**

6230 STONERIDGE MALL ROAD  
PLEASANTON, CA 94588

**New Principal Place of Business:**

**New Mailing Address:**

BANCO POPULAR NORTH AMERICA C/O E-LOAN  
120 BROADWAY 15TH FLOOR  
NEW YORK, NY 10271

**Current Mailing Address:**

6230 STONERIDGE MALL ROAD  
PLEASANTON, CA 94588

FEI Number: 77-0460084

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D (X) Delete  
Name: WILLIAMS, CAMERON E  
Address: 301 LIPPINCOTT DRIVE  
City-St-Zip: MARLTON, NJ 08053

Title: D ( ) Delete  
Name: JUNQUERA, JORGE  
Address: 209 MUNOZ RIVERA AVENUE  
City-St-Zip: HATO REY, PR 00915

Title: PRES ( ) Delete  
Name: LEFANOWICZ, MARK E  
Address: 6230 STONERIDGE MALL ROAD  
City-St-Zip: PLEASANTON, CA 94588

Title: D ( ) Delete  
Name: CARRION, RICHARD  
Address: 209 MUNOS RIVERA AVENUE  
City-St-Zip: HATO REY, PR 00915

Title: O ( ) Delete  
Name: PARACCHINI, ALBERTO J  
Address: 6230 STONERIDGE MALL ROAD  
City-St-Zip: PLEASANTON, CA 94588

Title: O (X) Delete  
Name: TRAN, ERIC D  
Address: 6230 STONERIDGE MALL ROAD  
City-St-Zip: PLEASANTON, CA 94588

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR (X) Change ( ) Addition  
Name: JUNQUERA, JORGE  
Address: 209 MUNOZ RIVERA AVENUE  
City-St-Zip: HATO REY, PR 00915

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: O (X) Change ( ) Addition  
Name: PARACCHINI, ALBERTO J  
Address: 9600 W.BRYN MAWR AVENUE  
City-St-Zip: ROSEMONT, IL 60018

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK E. LEFANOWICZ

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date