



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

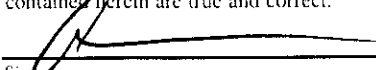
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000115279		2. Name of Corporation SLM Financial Corporation			
3. Street Address Principal Business Office 300 Continental Drive			City Newark	State DE	Zip 19713
4. Business Phone No.		5. State of Incorporation Delaware			
6. Brief Description of the Character of Business Conducted in Rhode Island Consumer and Mortgage Lending					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Joanne M. Jackson			Vice President Name Gretchen C. Johnson		
Street Address 300 Continental Drive			Street Address 12061 Bluemont Way		
City Newark	State DE	Zip 19713	City Reston	State VA	Zip 20190
Secretary Name Carol E. Rymal			Treasurer Name Michael M. Yurko		
Street Address 300 Continental Drive			Street Address 300 Continental Drive		
City Newark	State DE	Zip 19713	City Newark	State DE	Zip 19713
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name John J. Hewes			Director Name		
Street Address 12061 Bluemont Way			Street Address		
City Reston	State VA	Zip 20190	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares 1000	Class/Series Common	Par Value .01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date	FILED
Check No.	MAR 31 2009
By:	35207
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.


Signature
Date **3/27/09**
Ann Bowen
Print or Type Name
Director, Compliance Business Line Support
Title

ID # 000115279 Attachment for Officers in Question 7

- Assistant Secretary: Carol R. Rakatansky 12061 Bluemont Way, Reston, VA 20190

FILED

MAR 31 2009

By 115279